







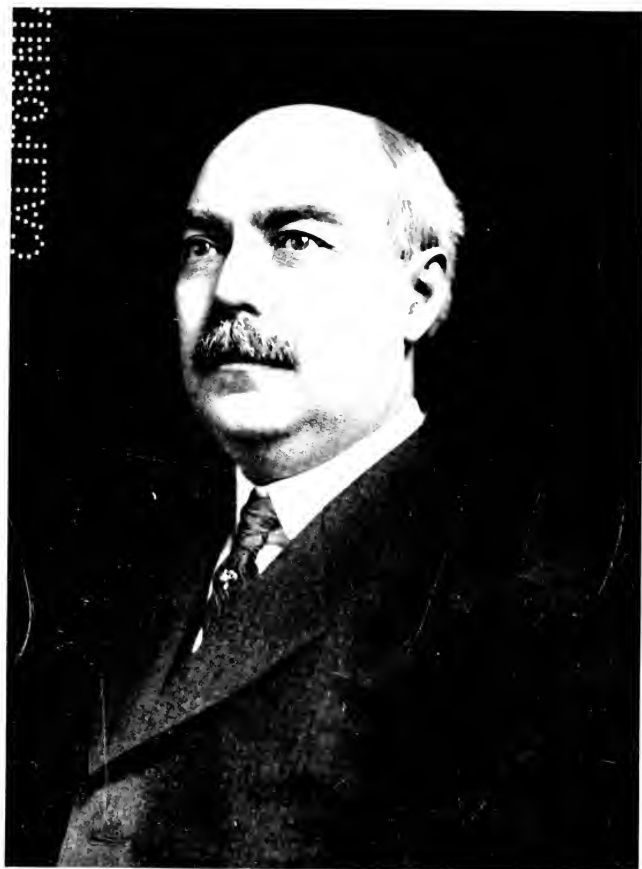




**A HISTORY  
OF BASE HOSPITAL 32**







J. K. LILLY  
*Founder*

*A History of*  
**BASE HOSPITAL 32**  
[INCLUDING UNIT R]

EDITED AND COMPILED BY  
**BENJAMIN D. HITZ**

WITH  
PHOTOGRAPHIC ILLUSTRATIONS BY  
**CHARLES S. STOUGH**  
AND OTHERS

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## PREFACE

THIS volume is published for the members of Base Hospital 32 and for their relatives and friends.

While the committee charged with its preparation has made every effort to produce a complete and accurate history of the hospital and its work, the chief aim has been to publish a book that would preserve for future recollection some of the details of the life and environment of the members of the unit during the war.

The task has not been without its difficulties. Authoritative sources of information, particularly as regards the early history of the hospital, have been limited. It is believed, however, that the material selected for publication embraces all of the more important phases of the hospital's work and of the activities of its personnel.

Most of the illustrations in the book have been selected from photographs taken in and about Contrexéville by Mr. Charles S. Stough, and are reproduced with his permission. Others were contributed by Mr. Edward Kurr, Mr. Martin L. Sutton and Mr. Vernon Sheller.

The committee desires to express its gratitude to Mr. William H. Thompson, whose efforts in securing copies of the hospital's official records from the Surgeon-General's office have contributed largely to the historical accuracy of the book.

Acknowledgment is also due Mr. Clarence R. Johnston, who furnished the history of Unit R; Miss Gertrude Steffen and Dr. A. B. Graham, for the medical and surgical section statistics; Mr. George Fishback for much of the history of the unit after the armistice, and to Drs. R. C. Beeler, Elmer Funkhouser, Chas. D. Humes, Lafayette Page, E. B. Mumford and Arthur E. Guëdel for their

generous assistance with the histories of their respective departments.

The committee is indebted to Miss Agnes Cruse, secretary of the Indianapolis Chapter of the Red Cross; Miss Florence Martin, Mrs. Benjamin D. Hitz, Mr. Otto Asperger, Dr. Robert M. Moore and many others who contributed important historical and statistical information.

EDMUND D. CLARK,  
CHARLOTTE CATHCART,  
MARY E. BOSTWICK,  
C. CURTIS DUCK,  
BENJAMIN D. HITZ,  
*Committee.*

# I

## UNDER THE RED CROSS

THE story of Base Hospital 32 begins early in February, 1917. At this time, with relations between the United States and Germany becoming daily more strained, a certain group of Indianapolis physicians was already resolving to volunteer its services in event of war.

The idea of organizing a hospital from Indianapolis began to take definite form on February 19, 1917, when the following letter from Mr. J. K. Lilly was received by the president of the Indianapolis Chapter of the American Red Cross:

FEBRUARY 19, 1917.

Mr. William Fortune, President, the Indianapolis Chapter, American Red Cross, City:

DEAR SIR—We are informed that a committee of physicians of this city and state are now perfecting the organization of a volunteer staff of physicians, surgeons and nurses to serve under the Red Cross in event our country becomes involved in the European war.

Having an earnest desire to co-operate to the fullest extent in the work of caring for our sick and wounded soldiers and sailors in the event of war, we offer the sum of \$25,000 to the Indianapolis Chapter of the American Red Cross for the purpose of equipping a base hospital in accordance with the specifications of the American Red Cross.

This gift is to be contingent only upon the actual declaration of war, and is made as a memorial to Colonel Eli Lilly, who, as an officer, faithfully served his country on the field of battle.

If consistent with the rules of the American Red Cross, it is requested that this base hospital shall be known as the Colonel Eli Lilly Memorial Red Cross Hospital wherever it shall be located; and in making our offer it is with

the hope that it will provide the staff of physicians, surgeons and nurses now being organized in this city and state with an equipment for rendering that service for which they volunteer.

Very truly yours,

ELI LILLY & COMPANY,

J. K. LILLY, President.

Mr. Lilly's generous offer was promptly accepted, and the Indianapolis Red Cross Chapter adopted the following resolution of appreciation:

*Whereas*, the Eli Lilly & Company, of Indianapolis, having offered this chapter, through its president, the equipment for a Red Cross Base Hospital, at a cost of \$25,000 in the event that the United States be drawn into the present European war, and on the condition that the required personal service for such hospital be given by physicians, surgeons and nurses of Indiana; therefore, be it

*Resolved*, That this generous and patriotic offer from the Eli Lilly & Company is hereby accepted; and, be it further

*Resolved*, That as an evidence of our appreciation for the high spirit which has prompted this gift, this hospital shall bear the name of Colonel Eli Lilly, whose splendid service as a soldier and citizen is worthy of the highest honor that can be accorded him in the annals of American patriotism; and, be it further

*Resolved*, That the full text of this resolution be engrossed and presented to the Eli Lilly & Company as a further recognition of their loyal and unselfish devotion to the cause of the United States and of humanity.

INDIANAPOLIS CHAPTER OF AMERICAN RED CROSS,

By WILLIAM FORTUNE, President;

GUERNSEY VAN RIPER, Secretary.

Indianapolis, February 19, 1917.

On April 7, 1917, a state of war having been declared between the United States and Germany, the donation

became available, and plans for organizing the hospital followed; Dr. John H. Oliver was appointed director, and the Indianapolis City Hospital was designated as the parent hospital. Associated with Dr. Oliver in this early work were Dr. O. G. Pfaff, Dr. David Ross, Dr. Frank Morrison and Dr. Charles F. Neu. Dr. Norman E. Jobes was appointed purchasing agent, and Mr. Louis Lathrop, disbursing officer.

The work of organization was well under way, and many of the most important purchases of equipment had been arranged when it became necessary to make a number of changes in the staff. Dr. Oliver, Dr. Ross and Dr. Morrison were disqualified because of physical disability, and Dr. Neu, who was born in Canada and had never taken out naturalization papers, was obliged to withdraw as he was not a citizen of the United States. Succeeding Dr. Oliver, Dr. Edmund D. Clark was appointed director with the rank of major on June 14th, and it was under his supervision that the work of organization was completed and the hospital prepared for overseas duty. Following the withdrawal of Dr. Jobes, Benjamin D. Hitz was appointed purchasing agent, and Mr. Lathrop was succeeded by C. Curtis Duck as disbursing officer.

The original plan of the Lilly Base Hospital called for a hospital of 500 beds, and the organization of the personnel and the purchase of equipment followed certain definite lines prescribed by the surgeon general's office. The personnel was to include twenty-two physicians and surgeons, two dentists, sixty-five graduate nurses, from six to ten civilian employes, and one hundred and fifty-three enlisted men. Certain alterations of this personnel were subsequently necessary and were authorized, but the general plan was adhered to, and it was with approximately this personnel that the unit sailed for France. The list of equipment for a base hospital of 500 beds published



in the United States Army Medical Manual furnished a guide for purchasing. Among the items of equipment were: 500 white enamel beds with full complement of mattresses, pillows and linen, 1,500 blankets, 250 bedside tables, five operating tables, a complete equipment of surgical instruments, X-ray and laboratory supplies, sterilizing apparatus, dental furniture and equipment, three regulation army ambulances, a two-ton truck, and a large assortment of drugs, dressings and minor hospital supplies.

As soon as the purchase of this equipment was well under way it became evident that the cost would greatly exceed \$25,000. The manner in which this problem was met is described in the official history of the Indianapolis Chapter of the Red Cross.\*

It was soon apparent that the cost of equipping the base hospital would be nearer \$50,000 than \$25,000. In fact, even this revised estimate proved too low. In order to provide for adequate equipment, it was agreed, as the result of negotiations carried on by Alfred F. Potts in July with the officials of the American Red Cross in Washington, that citizens of Indianapolis should contribute \$25,000 to the hospital instead of paying it into the national war fund. The national war fund, it will be remembered, was divided between national headquarters and the local chapter, the latter retaining only twenty-five per cent. The arrangement effected by Mr. Potts was a particularly happy solution, especially in view of the fact that two subscriptions amounting to \$27,500 had been made at the Indianapolis Club dinner with the understanding that they should be applied to the hospital. One of these two donations amounting to \$15,000, came from Mr. and Mrs. Josiah K. Lilly, further testifying to the interest of the founder of the hospital in the work which it was designed to do.

Early in the summer Dr. Clark, accompanied by Drs.

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\*"A Red Cross Chapter at Work," by Marie Cecile and Anslem Chomel.



LIEUTENANT COLONEL EDMUND D. CLARK



O. G. Pfaff, Carleton B. McCulloch and Bernays Kennedy, all of whom were active in organizing the hospital, made a trip to Washington, Baltimore and New York for the purpose of conferring with Surgeon General Gorgas and with Colonel Jefferson R. Kean, of the Red Cross, concerning certain details of the personnel and equipment. At Baltimore Dr. Clark was in conference with Dr. J. C. Bloodgood, of the Johns Hopkins University, and acquired valuable data concerning the Johns Hopkins Unit, which had already sailed for service overseas.\* Several base hospitals organizing in New York furnished additional information. It was on this trip, too, that the Lilly Base Hospital was officially recognized and designated as United States Army Base Hospital No. 32.

The selection of Dr. Clark's staff proceeded rapidly and was practically completed by July 1, although many of the commissions were not received until much later. The original staff included Dr. Orange G. Pfaff, chief of surgical staff; Dr. Carleton B. McCulloch, Dr. Alois B. Graham, Dr. Charles D. Humes and Dr. Eugene B. Mumford; Dr. Bernays Kennedy, chief of medical staff; Dr. Lafayette Page, Dr. Ray Newcomb and Dr. Joseph Kent Worthington. Other members were Drs. Leslie H. Maxwell, Paul Thomas Hurt, Smith Quimby, Ralph L. Sweet, Frank C. Walker, Scott R. Edwards, Ralph L. Lochry, Raymond C. Beeler, Robert M. Moore, Elmer Funkhouser, John T. Day and Joseph W. Ricketts. The dental staff was composed of Drs. J. W. Scherer and James V. Sparks.

Miss Florence J. Martin was appointed chief nurse and assisted largely in the selection and organization of the nursing personnel.

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\*The Johns Hopkins Unit, Base Hospital 18, sailed for France June 9, 1917. They were stationed at Bazoilles-sur-Meuse, about twenty miles from Contrexéville.

The first enlisted men reported for examination May 31, 1917. The number of applicants greatly exceeded the enlisted personnel limit, and the selections were, in the majority of cases, based upon special qualifications. Dr. Carleton B. McCulloch was active in the recruiting and selection of the men, and directed the physical examinations. Enlistment papers were signed on June 15th and 26th, and the men were ordered to be ready for an active service call at any date.

It is interesting to note that the organization and equipment of volunteer base hospitals had been delegated to the American Red Cross, and it was under their jurisdiction that the work of organizing and equipping Base Hospital 32 proceeded. Indeed it was not until September 1, 1917, when the unit was finally mustered into service, that the reins of control passed officially from the Red Cross to the War Department. Until that time practically all instructions relating to equipment and personnel came through Red Cross channels. The director, purchasing agent and disbursing officer were appointed by the American Red Cross, and were responsible to that organization. Monthly reports of disbursements were rendered to the national treasurer, and the purchase of equipment and the organization of the personnel were conducted under Red Cross supervision. The Indianapolis Chapter of the American Red Cross was closely associated with this early work, and the active interest and efforts of its president, Mr. William Fortune, contributed largely to expediting the organization and equipment of the hospital.

Mention should be made here of the splendid co-operation of the Indianapolis Red Cross Shop, which furnished the hospital with a complete supply of linen, bandages and surgical dressings. The Indianapolis Red Cross Shop began its operations early in the spring of 1917 with a





TRAINING AT FORT HARRISON



"32'S" CAMP AT FORT HARRISON



small group of women under the direction of Mrs. Philemon M. Watson. Mrs. Watson was succeeded as chairman, July 1, 1917, by Miss Jessie M. Goodwin. The history of this organization, its growth, and the extent of its work, is a story in itself, of which the equipping of Base Hospital 32 is but a part. The total number of articles furnished the hospital reached 46,371, and included sheets, pillow cases, pajamas, operating gowns, surgical linen, table linen, and an immense number and variety of surgical dressings and bandages. In addition to Mrs. Watson and Miss Goodwin, other ladies who were prominently identified with the hospital equipment work were: Mrs. Robert S. Foster, Mrs. Wm. Pirtle Herod, Mrs. Hugh McGibney, Mrs. Meredith Nicholson, Mrs. Douglas Jillson, Mrs. William L. Elder and Mrs. Thomas Eastman. The vast amount of labor required to produce all this equipment was the result of the combined effort and painstaking work of hundreds of loyal Indiana women. Long before the unit was mobilized every item had been completed, packed in cases for overseas transportation, and stored in a local warehouse ready for shipment.

Mid-August found the unit complete in every detail and eager for service. Officers' commissions that had been sidetracked in their devious journeys through the War Department were finally received. The enlisted personnel had been increased to 180. The work of packing and stencilling the equipment for overseas shipment was being rushed to completion. A few of the officers had already been called out and assigned to different stations for special training; Lieutenant Beeler to New York City for special X-ray work; Lieutenant Edwards to the Rockefeller Institute for instructions in Carrel-Dakin treatment. Lieutenant Quimby to Fort Riley, Kan., and Cap-

tain Worthington to Fort Worth, Texas. The vacancy left by the withdrawal of Dr. Ray Newcomb was filled by Dr. Harry F. Byrnes, an eye specialist of Springfield, Mass., who was already on duty at Fort Harrison with the rank of captain.

Rumors were rife that mobilization orders were imminent. Information came that two regular army officers would soon join the unit—one as commanding officer and the other as quartermaster, and that a non-commissioned officer would be assigned for the purpose of drilling the enlisted personnel. On August 15th Captain R. O. Wollmuth, Q. M. C., arrived in Indianapolis and reported to Dr. Clark for duty as quartermaster. Two days later the long-expected and eagerly awaited mobilization orders were received. In compliance with these orders the officers and enlisted men of Base Hospital 32 were to report at Fort Benjamin Harrison, September 1st, for a period of training and instruction. It was announced also that the nursing personnel would probably be mobilized at an early date, and trained at Ellis Island, joining the rest of the unit at the port of embarkation.

The last days of August were marked by great activity. Under the direction of Captain Wollmuth the enlisted men were measured for uniforms. Anti-typhoid and smallpox vaccinations occupied several days. Arrangements for quarters at Fort Harrison, and for the officers' and enlisted men's mess were completed. The army orders of August 24th directed that Captain H. R. Beery, Medical Corps, proceed to Indianapolis to assume command of Base Hospital 32. Captain Beery arrived in Indianapolis on August 27th and Sergeant Peter Pfranklin on August 30th.

It was about this time that additional excitement was injected into the situation when orders were received to

ship all equipment to the "Officer in Charge, Port of Embarkation, Pier 41, New York City." Rumors ran riot. It seemed certain that Base Hospital 32 would soon sail.

On September 1, 1917, the unit entrained for Fort Benjamin Harrison. The control of Base Hospital 32 passed from the Red Cross to the War Department, and the history of the hospital as a military organization had begun.

## II

### FORT HARRISON

THE mobilization of Base Hospital 32 is described in the *Indianapolis Star* of September 2nd:

Officers and enlisted men of Indianapolis Base Hospital No. 32 spent their first night in camp at Fort Benjamin Harrison last night and during their stay there will live according to the regulation military routine, with special instruction in hospital work in addition.

Commanded by Major Edmund D. Clark, director of the hospital, the men left the Union Station at 10 o'clock yesterday morning on a special train and were accorded as enthusiastic a "send-off" by the crowd assembled at the gates as if they were bound for France itself instead of for an encampment only a dozen miles away.

Forming ranks in the train sheds, the enlisted men marched in single file to the train, and after them came Major Clark, Capt. H. R. Beery, military commander; Capt. R. O. Wollmuth, quartermaster, and the physicians and dentists holding the rank of captains and lieutenants. There are about twenty-four officers and 150 enlisted men now in camp. Twenty-nine young men, enlisted with the hospital as privates, who were informed a day or so ago that they could not go into active training now, were among the crowd that witnessed the hospital unit's departure. These men possibly will see duty with the unit, however, as they are being held on the reserve list.\* Sergt. Pfranklin, of the regular army, has been appointed drill master for the hospital. He arrived in Indianapolis Thursday night and the mobilization work at the station was under his direction.

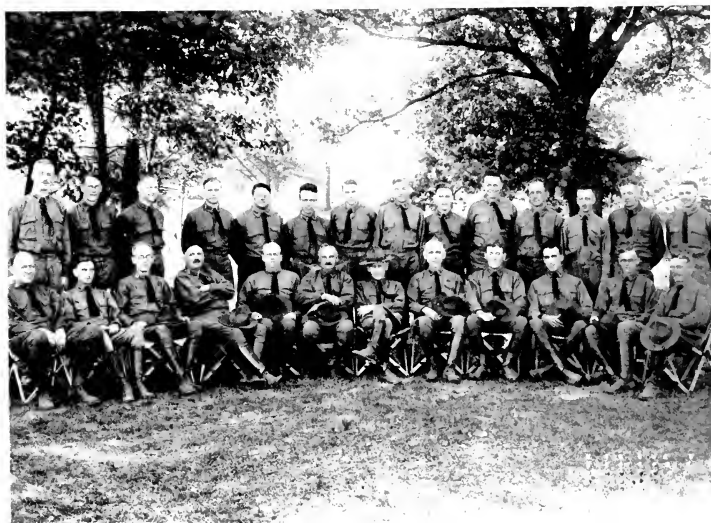
The staff officers were immaculate in brand-new uni-

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\*The mobilization orders limited the number of enlisted men to 153, and it was at first thought necessary to drop the surplus men from the roll. Subsequently, however, it was decided to hold them in reserve, and still later, owing to numerous transfers and withdrawals, many of them were finally attached to the unit.



NURSES OF BASE HOSPITAL 32 DRILLING AT COLUMBIA WAR HOSPITAL, N. Y.



BASE HOSPITAL 32 OFFICERS AT FORT HARRISON



forms, leather puttees, gold and black hat cords, and the "caduceus" on the collars. The enlisted men had been provided with rather shabby uniforms, many of them second hand, but new ones will be provided immediately, as well as new shoes.

The tents which Base Hospital 32 occupied at the fort were located in the northeast corner of the reservation. Six large tents, each accommodating approximately thirty army cots, served as quarters for the enlisted men. Smaller tents were erected for the officers, and three other tents were used for office headquarters, quartermaster's supplies and the officers' mess. A long line of tables east of the men's tents were provided for the men's mess. Water was piped to the front and rear of the company "street." In addition to their uniforms and clothing, each enlisted man received a mess kit, a shelter-half, three "O. D." blankets, and a luxury known as a bed-sack, which was filled with straw and served as a mattress.

The first days at the fort were given over to turning a bunch of raw recruits into soldiers. Both officers and enlisted men were drilled in military formations, familiarized with army regulations, and studied the Articles of War. Lecture on physiology and practical first-aid work were given the enlisted men by the junior officers. The calendar of the day included roll call, "setting-up" exercises, morning and afternoon drill periods, and lectures. In addition, the enlisted men, from time to time, were required to do guard duty, serve on policing details, and assist in the kitchen work. Non-commissioned officers were appointed, and under the direction of Sergeant Pfranklin, assisted largely by Sergeant Sheller, the work of drilling the men progressed rapidly. In a few weeks' time Base Hospital 32 acquired a proficiency in military formations and drill that was unusual in medical organizations.

In addition to Sergeant Sheller other enlisted men were singled out for special duty and promoted to corporals or sergeants. Among them were Callis, in charge of the mess, Asperger, Jennings and Duck in the headquarters office, Hitz in the medical supplies, George White in the quartermaster supplies and Reel, Rich, Swaim, Brewer, Pfaff, McHugh and Piatt Searle assigned to the detachment. Dudley White was in charge of the kitchen, assisted by Locchle, Hamilton, Plough, Hicks, Satters, Wagner and Kirkpatrick.

With all this intensive training the organization enjoyed a good deal of leisure at Fort Harrison. Evening and Sunday passes to Indianapolis were issued liberally. Long hikes and occasional rabbit hunts broke the monotony of crisp autumn days. Thirty-two's camp became a popular gathering place for Indianapolis visitors, and long lines of cars were often parked beyond the tents. A piano was brought in from somewhere, and camp fire parties filled the evenings with melody and song.

After a month's training the unit was as fit, physically, as an organization could be, and eager for service. During October, by arrangement with a number of Indianapolis hospitals, several detachments of men in charge of a non-commissioned officer were sent to these institutions for special instruction in hospital work. On October 17th the men received their first army pay, and on November 1st the tents were abandoned and the unit moved into wooden cantonments for the balance of their stay at the fort.

During this period of 32's history there were a number of changes in the personnel owing to transfer and withdrawals. On September 16th Major Clark and Captain Humes were ordered to Philadelphia for temporary duty with Dr. Frazier, head of the department of surgery of the University of Pennsylvania. During Major Clark's







AN EARLY MORNING WASH, FORT HARRISON



RABBIT CHASE, FORT HARRISON

absence Major Pfaff acted temporarily as director of the unit. Subsequently Major Pfaff was obliged to withdraw from the organization owing to an unfortunate accident which rendered him physically unfit for active service. Captain McCulloch was promoted to major and became chief of the surgical staff. Captain Worthington was transferred, and Captain Paul F. Martin was added to the roster. The position of chaplain was tendered to Bishop Joseph M. Francis, of the Episcopal Diocese of Indianapolis. During the last week at the fort Captain R. O. Wollmuth was relieved as quartermaster and was succeeded by Second Lieutenant Franklin P. Bushey.

A complete list of the officers and enlisted personnel of Base Hospital 32 during their period of training at Fort Harrison follows:

Major Harry R. Beery, M. C.....	U. S. Army
Major Edmund D. Clark, M. R. C.....	Indianapolis
Major Bernays Kennedy, M. R. C.....	Indianapolis
*Major Orange G. Pfaff, M. R. C.....	Indianapolis
Major Carleton B. McCulloch, M. R. C.....	Indianapolis
Captain Harry F. Byrnes, M. R. C.....	Springfield, Mass.
Captain Alois B. Graham, M. R. C.....	Indianapolis
Captain Charles D. Humes, M. R. C.....	Indianapolis
Captain Paul F. Martin, M. R. C.....	Indianapolis
Captain Eugene B. Mumford, M. R. C.....	Indianapolis
Captain Lafayette Page, M. R. C.....	Indianapolis
*Captain R. O. Wollmuth, Q. M. C.....	U. S. Army
*Captain Joseph K. Worthington, M. R. C.....	Indianapolis
Lieutenant Raymond C. Beeler, M. R. C.....	Indianapolis
Lieutenant Franklin P. Bushey, Q. M. C.....	U. S. Army
Lieutenant John T. Day, M. R. C.....	Indianapolis
†Lieutenant Scott R. Edwards, M. R. C.....	Indianapolis
Lieutenant Elmer Funkhouser, M. R. C.....	Indianapolis
Lieutenant Paul T. Hurt, M. R. C.....	Indianapolis
Lieutenant Ralph L. Lochry, M. R. C.....	Indianapolis

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\*Dropped from the roll of Base Hospital 32, prior to sailing, by transfer or otherwise.

†Sailed later as a casual, joining the unit at Contrexéville.

Lieutenant Leslie H. Maxwell.....	Indianapolis
Lieutenant Robert M. Moore, M. R. C.....	Indianapolis
Lieutenant Smith Quimby, M. R. C.....	Indianapolis
Lieutenant Joseph W. Ricketts, M. R. C.....	Indianapolis
Lieutenant Jack W. Scherer, D. R. C.....	Indianapolis
Lieutenant James V. Sparks, D. R. C.....	Indianapolis
Lieutenant Ralph L. Sweet, M. R. C.....	Indianapolis
Lieutenant Frank C. Walker, M. R. C.....	Indianapolis
Chaplain Joseph M. Francis, A. R. C.....	Indianapolis
John W. Ashe.....	Indianapolis
Lewis N. Ashworth.....	Connersville, Ind.
Otto Asperger.....	Indianapolis
Earl L. Baker.....	Bedford, Ind.
Wilbur Baldwin.....	New Harmony, Ind.
*Almer Barnes.....	Southport, Ind.
Albert J. Bartle.....	Shipperville, Pa.
Richard Beck.....	Delphi, Ind.
Charles H. Biltmier.....	Indianapolis
Morris Blumenthal.....	Indianapolis
*Kenneth Bonesteel.....	Indianapolis
†Thomas Bowman.....	Evansville, Ind.
Harry M. Boyer.....	Indianapolis
Bernard Bradley.....	Elwood, Ind.
Ralph J. Brewer.....	Indianapolis
William J. Brosnan.....	Indianapolis
Harry W. Brown.....	Monrovia, Ind.
John Bubelis.....	Lynn, Ind.
*Edmond Butler.....	Indianapolis
Harold B. Callis.....	Kokomo, Ind.
Clarence L. Campbell.....	Indianapolis
John P. Carroll.....	Indianapolis
Charles Carter.....	Indianapolis
Colby L. Chapman.....	Greensburg, Ind.
Jay Connaway.....	Indianapolis
Raymond A. Cooke.....	Goodland, Ind.
Vernon R. Corrigan.....	Indianapolis
Benjamin A. Cotharin.....	Huntington, Ind.

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†Sailed later as a casual, joining the unit at Contrexéville.

*John Dages.....	Muncie, Ind.
Albert L. Daugherty.....	Indianapolis
John P. Davey.....	Indianapolis
William P. Davis.....	Indianapolis
David Dean.....	Indianapolis
Joseph C. Delaney.....	Indianapolis
Moris W. Drake.....	Shelbyville, Ind.
Morris Drosdowitz.....	Indianapolis
C. Curtis Duck.....	Indianapolis
John H. Duncan.....	Greenfield, Ind.
Herman L. Earnest.....	Indianapolis
Ernest Erdmann.....	Greensburg, Ind.
Rufus A. Eudaly.....	Sheridan, Ind.
Winters W. Fehr.....	Indianapolis
Clem R. Feirrell.....	Muncie, Ind.
George Fishback.....	Terre Haute, Ind.
Harry W. Fisher.....	Indianapolis
Kenneth Fisk.....	Indianapolis
Earl H. Fitchett.....	Indianapolis
Harry H. Fletcher.....	Indianapolis
Walter A. Foreman.....	Windfall, Ind.
Malcolm Fox.....	Indianapolis
Benjamin H. Gaither.....	Indianapolis
Terry Geise.....	Indianapolis
Roger Giles.....	Richmond, Ind.
Harry C. Gilmore.....	Franklin, Ind.
Homer B. Goodale.....	New Castle, Ind.
Paul R. Graham.....	Elwood, Ind.
*Dwight Green.....	Indianapolis
Hugh H. Green.....	Indianapolis
Earl M. Gregory.....	Indianapolis
John L. Griffith.....	Indianapolis
Edd G. Hagaman.....	Indianapolis
Hallie L. Hamilton.....	Yeoman, Ind.
Samuel O. Hart.....	Anderson, Ind.
Robert F. Heffner.....	Muncie, Ind.
Lewis C. Herbert.....	Cairo, Ill.
Elmer H. Hess.....	Indianapolis

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Wilbur Hicks.....	Indianapolis
Emmett Hiland.....	Zionsville, Ind.
Howard E. Hildebrand.....	Huntington, Ind.
Benjamin D. Hitz.....	Indianapolis
John W. Hoffman.....	Indianapolis
Harry R. Hollenbeck.....	Indianapolis
*William J. Holliday.....	Indianapolis
Herman H. Hollingsworth.....	Goshen, Ind.
John J. Holloran.....	Indianapolis
Robert V. Hunsdon.....	New Harmony, Ind.
William V. Iverson.....	Indianapolis
Coutsie R. Jackson.....	Noblesville, Ind.
Loomis Jennings.....	Indianapolis
Richard K. Johnson.....	Indianapolis
William C. Johnson.....	Lafayette, Ind.
Dwight K. Jones.....	Indianapolis
Gerald G. Jones.....	Danville, Ind.
Arthur A. Judd.....	Indianapolis
Basil D. Judkins.....	Indianapolis
Edward C. Kahle.....	Indianapolis
Charles D. Kelly.....	Indianapolis
*Wallace Kemp.....	Indianapolis
Russell B. Kirkpatrick.....	Rushville, Ind.
John P. Kroeger.....	Indianapolis
Edward Kurr.....	St. Paul, Ind.
Cornelius J. Lanahan.....	Indianapolis
Thomas Lanahan.....	Indianapolis
John H. Langan.....	Tipton, Ind.
Lloyd L. Locke.....	Bridgeport, Ind.
William P. Loechle.....	Indianapolis
Luke Logan.....	Indianapolis
*Lynn Logsdon.....	Indianapolis
Clifford Lounsbury.....	Schenectady, N. Y.
Clifford E. Lupton.....	Indianapolis
Marchael C. Lyons.....	Indianapolis
George E. Magee.....	Indianapolis
Artie V. Mangus.....	Indianapolis
Paul R. Matthews.....	Indianapolis

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GARE DE L'EST, CONTREXEVILLE



RUE DU PONT ROUGE, LOOKING TOWARD THE ROYAL





Walker R. Marshall.....	Bloomfield, Ind.
John R. Maughan.....	Indianapolis
John McArdle.....	Indianapolis
William N. McClure.....	Indianapolis
*Marion McCormick.....	Indianapolis
Duncan C. McDougall.....	Indianapolis
Irwin C. McDonald.....	Lebanon, Ind.
Jay B. McElwaine.....	Indianapolis
Thomas D. McHugh.....	Indianapolis
John D. McIntire.....	Indianapolis
Cyril A. McLaughlin.....	Bellefontaine, Ohio
*Charles Meyer, Jr.....	Indianapolis
Elmer E. Miller.....	Elwood, Ind.
*Martin Moran.....	Indianapolis
Pierre S. Morgan.....	Indianapolis
Paul W. Mulcahy.....	Logansport, Ind.
*Theodore Munchoff.....	Indianapolis
Wade J. O'Hern.....	Indianapolis
Raymond O'Reilly.....	Indianapolis
*Kenner Palmer.....	Washington, Ind.
*Dudley Pfaff.....	Indianapolis
Peter Pfranklin.....	U. S. Army
Vern F. Plough.....	Marion, Ind.
Theodore G. Plumb.....	Indianapolis
Harold B. Poindexter.....	Indianapolis
Whitney C. Porter.....	Indianapolis
Joseph M. Pugh.....	Indianapolis
Edward T. Quinn.....	Indianapolis
Oliver Reed.....	Indianapolis
Leonard R. Reel.....	Indianapolis
Edward D. Reeves.....	Indianapolis
Clarence D. Reitenour.....	Union City, Ind.
Roy F. Rich.....	Indianapolis
Harry L. Riddell.....	Indianapolis
Glenn A. Riggs.....	Indianapolis
Paul F. Ritter.....	Indianapolis
Dar A. Robinson.....	Frankfort, Ind.
Paul N. Routh.....	Zionsville, Ind.

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Frank Russell.....	Greensburg, Ind.
Albert C. Sanagan.....	Indianapolis
*George Sandford.....	Indianapolis
Albert Satters.....	Morgantown, Ind.
*Paul Scharffin.....	Indianapolis
Ferrell G. Searle.....	Greenville, Ohio
*Piatt Searle.....	Indianapolis
Charles G. Selch.....	Indianapolis
Vernon G. Sheller.....	Indianapolis
Arnold J. Sellmeyer.....	Indianapolis
Peter J. Sertell.....	Indianapolis
Glenn Smith.....	Indianapolis
Montelle E. Smith.....	Indianapolis
*Raymond Smith.....	Terre Haute, Ind.
Claude E. Snyder.....	Indianapolis
Wilbur M. Stephan.....	Chalmers, Ind.
William A. Stephens.....	Indianapolis
*Elam Stewart.....	Paxton, Ill.
Charles S. Stough.....	Indianapolis
Louis S. Stuart.....	Indianapolis
Bernard Stuvell.....	Indianapolis
Leslie E. Summers.....	Chicago, Ill.
Martin L. Sutton.....	Indianapolis
George O. Swaim.....	Indianapolis
*Ralph D. Thrasher.....	Indianapolis
William H. Wagner.....	Shelbyville, Ind.
*Ray Wakefield.....	Indianapolis
Paul W. Weer.....	Indianapolis
Russell D. Wells.....	Indianapolis
Don Westfall.....	Indianapolis
Dudley White.....	Spencer, Ind.
George L. White.....	Kentland, Ind.
Clifford J. Williams.....	Indianapolis
Earl M. Wise.....	Indianapolis
Worth E. Wright.....	Indianapolis
Earl W. Yarling.....	Indianapolis
Lowell R. Young.....	Indianapolis
Ray R. Yount.....	Trafalgar, Ind.

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The last month at Fort Harrison was filled with rumors. The unit was impatient for active service, and sailing orders were expected momentarily. On November 3rd the enlisted men gave a farewell party at the Hotel Severin in honor of Major and Mrs. Beery. The party was a great success, but the farewell proved premature, and time dragged on. About the middle of November it became known that the hospital equipment which had been shipped to New York had been sent ahead to an unknown port in France. It was also published that all units were to leave, and the fort was to be cleared by December 1st. Hopes ran high, and rumors multiplied. On November 28th orders were actually received to be prepared to entrain December 1st, only to be rescinded within twenty-four hours. It was rumored that the hospital would not sail before spring. Hopes were dashed, and the morale was low. About ten o'clock Saturday morning, December 1st, after many of the officers and men had left the fort on passes, orders were received that Base Hospital 32 would entrain for Hoboken at six o'clock that night. With less than eight hours to complete all traveling arrangements, the last day at the fort was one of feverish activity. Phone calls and messengers were rushed to Indianapolis to bring back the men who had gone in on passes. Typewriters, office equipment, quartermaster and mess supplies were packed for shipment. Travel rations were obtained, barracks cleaned and personal baggage packed. By five o'clock Base Hospital 32 was ready to leave. Meanwhile news of the travel orders spread over Indianapolis, and relatives and friends gathered at the fort for a last farewell. At a few minutes before six the men shouldered their packs, and, with officers leading, marched to the waiting train.

During these three months while the officers and men were training at Fort Harrison the nurses of Base Hos-

pital 32 were undergoing a somewhat similar experience at Hoboken and Ellis Island.

On September 7, 1917, the following nurses took the oath of office at the Indianapolis City Hospital and were assigned to active service in the military establishment:

Florence J. Martin, Chief Nurse.....	Indianapolis
Hazel Alkire.....	Marco, Ind.
Elizabeth Bachinger.....	Indianapolis
Lillie V. Beck.....	Indianapolis
Hazel Fern Bennett.....	Indianapolis
Martha R. Berger.....	South Bend, Ind.
May Berry .....	Indianapolis
Helen Biggert.....	Crawfordsville, Ind.
Nellie M. Birch.....	Terre Haute, Ind.
Dixie Borders.....	Indianapolis
Mary M. Bowen.....	Indianapolis
Bertha E. Boyles.....	Indianapolis
Viola Mae Burleson.....	Indianapolis
Julia Clements.....	Indianapolis
Mayme C. Clickner.....	Indianapolis
Nelle B. Davis.....	Indianapolis
Ruth E. Dillon.....	Indianapolis
*Goldie Downs.....	Indianapolis
Emma F. Ealey.....	Indianapolis
Jessie M. Ervin.....	Indianapolis
Maude F. Essig.....	Elkhart, Ind.
Mary Fergusson.....	Indianapolis
Susan Genolin.....	Indianapolis
Edna June Gray.....	Indianapolis
Mary Gladys Grim.....	Indianapolis
Mary B. Houser.....	Indianapolis
Birda R. Hunt.....	Indianapolis
Ruth H. Ikerd.....	Bloomington, Ind.
Mary F. Kochman.....	Indianapolis
Alma Lancaster.....	Indianapolis
*Laura E. Lowe.....	Indianapolis

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CONTREXEVILLE LOOKING TOWARD VITTEL



THE MILL

Bertha B. Mahan.....	Indianapolis
Mary Ruth McBee.....	Crawfordsville, Ind.
Elizabeth Melville.....	Fort Wayne, Ind.
Estelle F. Miller.....	Indianapolis
Jeanette A. Miller.....	Indianapolis
Edna C. Mowrer.....	Indianapolis
Mary E. Mullen.....	Liberty, Ind.
Clara L. Need.....	Indianapolis
Mayme O'Connell.....	Indianapolis
Marie O'Keefe.....	Indianapolis
Elsie Peacock.....	Indianapolis
Lena Lee Payne.....	Indianapolis
Evelyn Potter.....	Indianapolis
Amy A. Prosser.....	Indianapolis
Beulah G. Prust.....	Terre Haute, Ind.
Tulie I. Roberson.....	Indianapolis
Nellie Rock.....	Indianapolis
Eleanor C. Ryan.....	Indianapolis
Ida A. Scholer.....	Indianapolis
Myrtle Shimer.....	Wanamaker, Ind.
Golda F. Smith.....	Terre Haute, Ind.
Helen A. Thompson.....	New Harmony, Ind.
Addie Threlkeld.....	Indianapolis
Ruth Gayle Totten.....	Indianapolis
*Mary Tyner.....	Indianapolis
Hermine E. Wagner.....	Indianapolis
Alys Weitendorf.....	Indianapolis
Ruth Wright.....	Indianapolis

The majority of the nurses who volunteered held responsible positions in the different lines of nursing activities, superintendents of training schools, supervisors, head surgical nurses, public health nurses and valuable private duty nurses alike gave up their work to serve with the Base Hospital without question of remuneration or position on the nursing staff.

On Sunday morning, September 9, 1917, these nurses

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left Indianapolis, under orders to proceed to U. S. Army General Hospital No. 1, Gunhill Road and Bainbridge Avenue, New York, to await transportation to France.

Just before the unit boarded the train it received an American flag, the gift of the Indianapolis City Hospital Alumnae Association. The colors were presented by Miss Elizabeth Johnson and accepted by Florence J. Martin. Later, while in New York, the unit received an Indiana banner, the gift of Mrs. Charles Mayer, of Indianapolis, and the Indianapolis Chapter of the American Red Cross gave each nurse a rubber blanket and fifty dollars in gold.

When the nurses arrived in New York they were joined by

Mary A. Scales (Assistant to C. N.).....	Newark, N. J.
Mary Kennedy.....	Harvey, Ill.
Alice Harvey.....	Washington, D. C.
Mary Mangan.....	Detroit, Mich.
Johanna Montgomery.....	Detroit, Mich.

and just before sailing:

Margaret McCoppin.....	Brooklyn, N. Y.
Anna Marie Rohr.....	Massapequa, L. I.
Olga Anderson.....	Plainfield, N. J.
Florine Ostenzi.....	Brooklyn, N. Y.

For the first three weeks the nurses were quartered at the newly established U. S. Army General Hospital (Columbia War Hospital), which was built to accommodate 1,500 American wounded when they would come from the European battlefields. Here the nurses received their first impressions of army life, the wooden barracks with rows of white beds, the shower baths, the mess line and bare tables, the two hours' drill each morning, and the grand rush into the city for uniforms and other equipment.



On September 28th orders were received for the Army Nurse Corps of Base Hospital No. 32 to proceed to St. Mary's Hospital, Hoboken, N. J., at 11 a. m., on the following day. The three-weeks' stay at Hoboken was by no means uneventful, the most important event being the Red Cross parade on October 4th, in which 10,000 women in the service of the Red Cross marched down Fifth Avenue. The nurses of Base Hospital No. 32, in blue dresses without capes, marched with 2,000 other nurses, who were soon to be in service in France. Then after more days of waiting came the third installment of travel orders. Baggage was to be ready at 8 a. m., and again sailing orders loomed up only to land the nurses at Ellis Island.

There, through the efficiency and kindness of Misses Mury and Jourgensen, the final touches were put on the preparations for overseas service. The terrifying pass that each nurse must guard with her life, Liberty Bonds, War Risk Insurance and identification papers were secured.

On October 27th the following civilian employees of the enlisted personnel reported for mobilization with the nurses of Base Hospital 32:

Mary Bostwick (Stenographer).....	Indianapolis
Charlotte Cathcart (Stenographer).....	Indianapolis
Georgia Finlay (Dietitian).....	Oneida, Ill.
Geraldine Frost (Stenographer).....	Washington, D. C.
Mary Beaty Herod (Interpreter).....	Indianapolis
Gertrude Steffen (Stenographer).....	Indianapolis

From the time they joined the unit they became an indispensable part of the organization.

On December 2nd the long-awaited travel orders came. Since it was Sunday, only a few of the nurses were found at home, and the last boat nurses did not receive the news until midnight. The rest of the night was taken up with hurried shampoos, baths, washing and final packing. But

with the invaluable assistance of Punch and Judy, two soldiers who had been assigned to the nurses at Ellis Island, all baggage was ready and the nurses boarded the tug that carried them to the Hoboken docks at 11 a. m. The nurses of 32 will never forget the kindness of the Ellis Island employees, especially in those last few minutes—the restaurant men bringing sandwiches and coffee to the tug, the captain holding up the boat until the mail, just arrived, had been distributed, and the farewell from the hundreds of employees in the immigration building.

It was on board the now famous *George Washington*, about to make its first trip as a transport, that the nurses joined the officers and enlisted personnel of the unit, and at ten o'clock on the evening of the 4th of December set sail for France.

### III

#### THE VOYAGE

##### LINES DEDICATED TO THE BAY OF BISCAY.

The terrorizing Teuton and the wily Magyar horde,  
Were threatening the Universe, and so we went aboard,  
That steady transport, Washington, one sunlit day serene,  
To sail the Bay of Biscay in the Fall of Seventeen.

The troop ship, it was crowded with coons and stevedores,  
Packed lengthwise, sidewise, endwise, betwixt the various floors.  
(In nautical vernacular, I'd say "the decks between"),  
When we sailed the Bay of Biscay in the Fall of Seventeen.

Our sailing was auspicious as we slipped away at night.  
They corked up all the funnels and they doused each vagrant  
light,  
As we slipped away to Europe with water, wind and steam,  
To sail the Bay of Biscay in the Fall of Seventeen.

The planet-powdered heavens were studded with the flare,  
Of lustrous constellations whose providential glare,  
Insistently invited us to hurry and convene,  
Across the Bay of Biscay in the Fall of Seventeen.

But Aeolus was angry and he loosed a tiny breeze,  
Which crumpled up the ocean with overwhelming seas,  
Till each face was full of anguish, each countenance was green,  
When we crossed the Bay of Biscay in the Fall of Seventeen.

The pudding that we swallowed we soon put over side,  
With gastric gurgitations that could not be denied.  
There would have been no difference if dessert had been ice  
cream,  
The Bay was mighty turbulent, December, Seventeen.

Slum-gullion for breakfast, slum-gullion at noon,  
With frequent interspersing of the ever-faithful prune.  
Oh, these and other hardships would often intervene,  
When we sailed the Bay of Biscay in the Fall of Seventeen.

The sun was always shining in the pleasant land of France,  
The women all were beautiful, you saw it at a glance.  
The wine was effervescent, it had to be, I ween,  
To tempt me 'cross old Biscay in the Fall of Seventeen.

When the struggle is concluded and victory is sure,  
The foe must take some punishment most grievous to endure;  
I'll offer this suggestion when the councillors convene—  
They be made to cross old Biscay in some Fall like Seventeen.

December, 1917.

DR. CARLETON B. McCULLOCH.

THREE months and four days after Base Hospital 32 had been mustered in the unit set sail for France. The officers, nurses and enlisted men had their first reunion on board the transport *George Washington* on the morning of December 3rd. When the nurses and their multitudinous baggage arrived the officers and men were already aboard, having detrained at Hoboken early in the morning and marched directly to the pier.

Here, after a final physical examination, the men filed up the gangway and were directed to their quarters in section G-1, far down below the water line where the bunks were swung in tiers, three high, one above the other. As they passed on to the ship each man was handed a printed slip of instructions, of which the following is a facsimile:

## INSTRUCTIONS FOR TROOPS.

Your bunk No. is	Troop Space	Abandon Ship.
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Decks are lettered from upper deck down: A, B, C, D, E, F and G.

Troop spaces are lettered and numbered: the letter signifying the deck and the number the troop space on that deck, counting from forward.

Keep your life preserver with you at all times when at sea. Before disembarking, make the life preserver fast to your bunk, as others will want it after you have left the ship.

**The use of tobacco, either smoking or chewing, is prohibited at all times in the berthing spaces.**

**Smoking allowed** in messing spaces on E deck at night after supper, until tattoo is sounded. On open deck during daylight.

**Matches and searchlights are not allowed in the ship.**

Smoking lamps are provided in messing spaces instead of matches.

Remember that an exposed light may result in the discovery of the ship by the enemy. **Do not throw** rubbish of any kind into toilet or wash troughs. (This includes tobacco bags and heavy paper.)

**It is forbidden to throw anything overboard in the daytime.**

All rubbish will be put in the rubbish cans placed about the ship.

All wooden boxes and other articles that will float will be sent to the fire room or galleys and burnt. Metal boxes and cans will be punched with holes and thrown overboard at night with the garbage. Do not place anything in garbage cans that will float.

Wash your mess gear in **TUBS** provided for that purpose. Wash your face and hands in **BASINS** in the **WASH ROOMS**. **DO NOT REMOVE BASINS** from the **WASH ROOMS**.

When the general alarm gongs are sounded, men assigned to life boats will "fall in" abreast of their respective boats.

Men berthed in F-1, F-3, F-4 and G-1 who man life rafts, will "fall in" in E-4. All other men will stand fast by their bunks and await orders.

In case of Abandon Ship, remember there is lots of time and every man must wait for a call.

Troops may use the following spaces for recreation:

"C" deck, both sides, from main-mast to jiggermast.

"D" deck, from after bulkhead to stern.

Troops must not enter officers' quarters except on duty.

Troops are forbidden the following places at all times, except when on duty:

1. All that part of the ship forward of the mainmast.
2. All decks above "C" deck.
3. "B" and "C" deck of after deck house.
4. Engine and fire rooms.
5. Steering engine room.
6. Cargo spaces and hatch trunks.

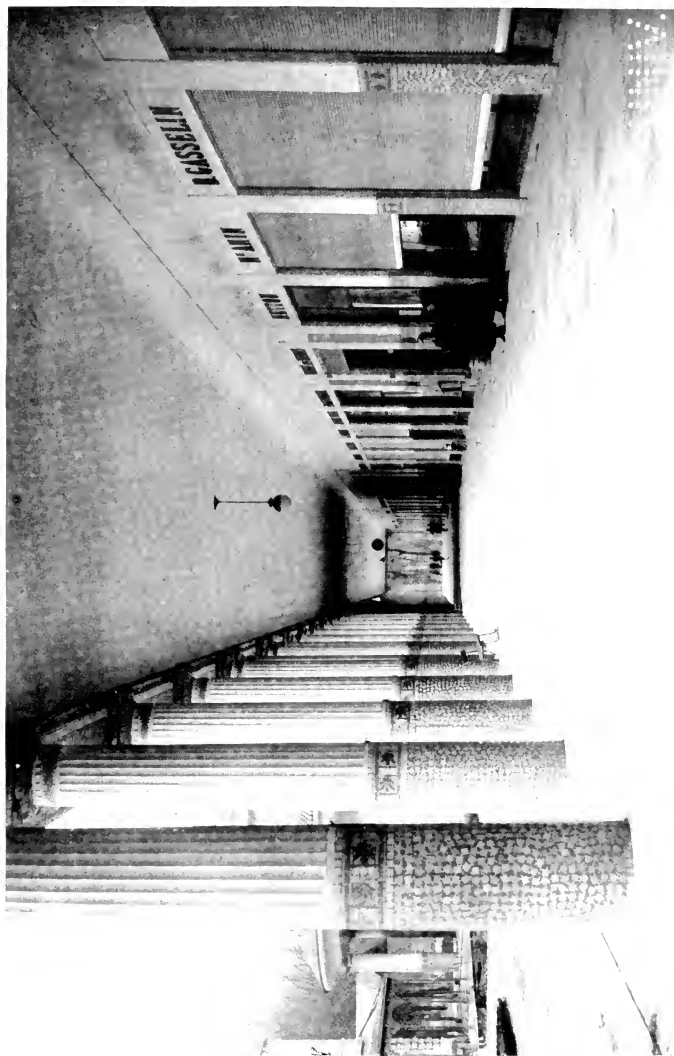
Do not crowd or rush. To do so will cause confusion and possible loss of life. Consult bulletin boards for your Abandon Ship station.

The *George Washington* had formerly been a German liner of much glory and splendor, with noble saloons and lounges, luxurious furniture, and an abundance of carving, frescoing and other decorations, but since the time the German government had parted with its prize all this had been changed. Gone were the handsome furnishings of the boat; vanished entirely were the articles and objects designed for the gratification of a luxury-loving traveling public. The *George*, as the boat came to be called, with more or less affection, depending on whether one was seasick or not, was now a transport, nothing more. All that remained of its former splendor were the placid portraits of George Washington and his faithful spouse, Martha, which still gazed down from the walls of the former lounge.

The unit had felt large and important before it went on board, but it was quickly absorbed in the vast throngs of other patriotic voyagers. In all the transport carried some 8,000 troops. These included the Sixth regiment of engineers in command of Colonel Hartz, who was military commander of the boat, several companies of extremely brunette stevedores fresh from the southern states, and a scattering of infantrymen, artillerymen, aviators and coast artillerymen, not to mention some army field clerks and civilian employees, who did not seem to exactly belong. Among the more noteworthy passengers were six major generals: Major Generals Green, Hale, Plummer, Bell, Allen and Swift.

The first day on board passed uneventfully. Those who imagined the boat would sail that night were disappointed. All that night and all the following day the big bateau remained tied to Pier 3. Those on board roamed at large over the vessel, poking their noses down the hatches where loading was continually going on, mounting the bridge deck for a better view of the harbor, or

THE COLONNADE







exploring the lowest recesses of the hold. All about was great activity. Whistles tooted, machinery groaned and squeaked. Guards stood at the gangways to prevent any one from going ashore. Everybody wandered about asking everybody else when the boat would sail, and while no one knew definitely, all concerned were right on hand with "I heard" or "they say"—the rumors including such comforting reports as that Wall Street was betting four to one that the *George Washington* would never make port. An "abandon ship" drill also enlivened the last day, every one being presented with brand new life preservers all as white as snow, although long before the end of the voyage was reached these same life preservers looked as if they had made numerous journeys in an ash cart.

The rumor, apparently well founded, was abroad that the *George* would sail the night of December 4th, and every one was naturally desirous of remaining above deck to do a little farewell cheering and catch a last glimpse of the Statue of Liberty. Only a favored few were thus privileged, and at an early hour the vast majority was chased below decks to their hermetically sealed state-rooms, or to their more or less odorous quarters on the lower decks. Sometime between ten and eleven o'clock the throb of the engines ran over the ship, increasing steadily in intensity, and the *George Washington* started on its journey for France, slipping out, as did all other transports, silent and dark, not a light showing.

Far, far from the U. S. A., was the *George* when morning came. On all sides the ocean stretched away endlessly to the horizon. Accompanying the *George Washington* was another, and somewhat smaller transport, the *Huron*, and convoying the two were the *Montana*, a venerable sea fighter, and a torpedo destroyer which was to chaperon the convoy until it got far enough out into the ocean to reduce the danger of submarines to a minimum.

Every possible precaution against submarines was taken. All matches and flashlights were given up to the ship's authorities. Windows and portholes were closed and sealed, and all passageways opening directly on to the decks were either unlighted, or lighted only by a dim blue lamp. Every few yards along the rail of the promenade deck were lookout stations, in each of which two guards, one sailor and one soldier, constantly scanned the horizon with field glasses, and reported every foreign object to the bridge by telephone. The ship zig-zagged continuously on her course, veering first to right then to left, and so did the other ships in the convoy. Nor was the *George* entirely unprepared to do a little scrapping on her own account, as guns, with nosebags over the muzzles to protect them from the damp sea air were mounted both fore and aft. Target practice one afternoon proved the presence of some excellent gunners aboard, but no submarine offered them a chance for real action.

It was not long before all on board became accustomed to the ship, and to its routine, although, aside from the regular "Abandon Ship" drills, which came at irregular intervals, there was not much routine, except for the guards in the lookout boxes and the unhappy officers who had to take their turns climbing aloft to the crow's nest. Very few of the officers escaped this, and a portly officer crawling up a ladder and later making his way through the inside of the mast, to emerge into the open and haul himself over the edge of the nest, is considerable of a sight. The decks were absolutely dark at night; not a cigar, cigarette or flashlight was permitted. The precautions even went so far that some of the nurses who had tam-o'shanter's with little white pompons on the top were ordered to remove said white pompons for fear that a prowling U-boat might sight one and get the range. White sweaters were forbidden. As for lighting a match

on deck, anybody that did that would probably have been buried at sea. However, though this business about the darkened decks was undoubtedly a hardship, all concerned seemed to bear up bravely under it, and it did not interfere with nocturnal promenades.

The enlisted men would gather together on E deck and sing such famous cantos as "Over There," "Joan of Arc" and "Good-bye, Broadway." They sang well and always had a large and enthusiastic audience hanging over the railing on the deck above listening, everybody with life preservers slung around their necks, like the Albatross and the Ancient Mariner in the poem.

The days passed quietly and peacefully until the afternoon of December 7th. It had been warm that morning, but the sky and sea were gray, and it got colder, and before long those who had loudly proclaimed they wanted to see a storm at sea got their wish. Rain and a tearing wind swept down upon the convoy. The seas got higher and higher, and the *George* tipped like a pendulum, while the little torpedo destroyer careened like a toy boat, sometimes completely hidden by the water. Along in the middle of the afternoon there began a series of terrific crashes from the dining-room on C deck, as, with a grand rattle, all the crockery slid off the tables, and from all parts of the boat sounded the bang and smash of bottles, dishes and other breakables.

It was then that the good sailors began to be distinguished from the bad sailors, for *mal de mer* descended like a blight upon the company. It was no respecter of ranks—generals, majors and colonels succumbed and lay in ghastly greenish rows in their deck chairs. The sight on the foredeck, where the enlisted men emerged to take the air, was pitiful in the extreme. Those who were not seasick rudely sang a song, "My breakfast lies over the ocean, my breakfast lies over the sea, my breakfast lies

over the ocean, O! bring back my breakfast to me," and on all sides were evidences of the deadly hatred engendered between those who are seasick and those who are not. The majority of those on board passed entirely away, and lay in their rocking, tipping berths or bunks, where they slid around like so many fried eggs on a plate. It was on this morning, too, that a man fell overboard from the *Montana*, that was wallowing along a short distance away, and although a life preserver was thrown over to him, nobody could tell with any certainty whether or not he was rescued.

The next day, Sunday, was probably the most unusual Sunday that any of the travelers had ever experienced. The sea was smoother by this time and many of the dead had come back to life, and once more the air was as warm as summer. The *Montana* was to the starboard of the *George*, and the *Huron* to port—already we had picked up these nautical terms—while the destroyer ran about the surface of the deep like a spider, once going off to investigate a mysterious steamer that appeared on the horizon, but neglecting to inform anybody what it was all about.

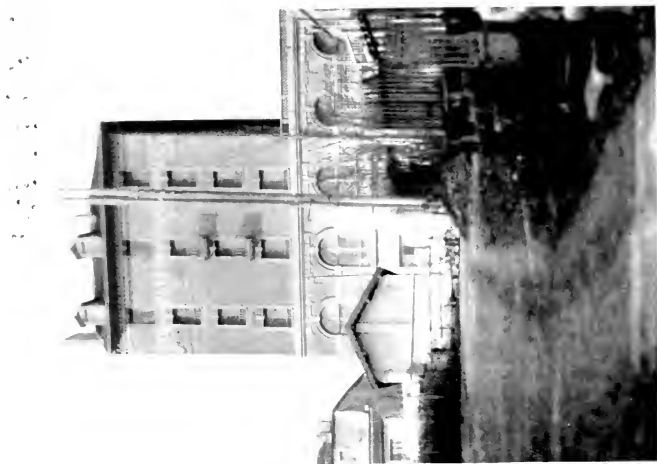
The unusual feature of the day was the church service that was held on E deck. Not that there was anything unusual about the service itself, for it consisted only of a prayer or two, some hymns—with "Matty" presiding at the piano—and a short talk by Bishop Francis, but the whole scene was unforgettable, the nurses and officers grouped on benches, while enlisted men, black and white, stood in every available corner, with the impressive figure of the bishop conducting the simple rites. The Episcopalian service was followed by mass.

The next four days the weather remained warm and delightful, as if the *George* was cruising in tropic waters, with the sea like liquid glass. We had been told that we





CHURCH USED BY BASE HOSPITAL 32



FACADE, HOSPITAL A

would soon enter the danger zone, and that a convoy of destroyers would shortly pick us up, but for days all the watching of the horizon failed to reveal this much advertised convoy, and "somebody" said that a message had been received in the wireless room, and that the message was said to have come from a U-boat, and that it said, "Come on, *George Washington*, you're three days late." Those of nervous temperament were regaled with this narrative so frequently that they got a drawn look about the eyes. Abandon Ship drills went on, the life preservers by this time presenting a most horrible appearance. The engineers' fife and drum corps played frequently, with ear-splitting energy; target practice was indulged in by the gobs, the colored brethren expressing great distaste for this proceeding. A new custom was also inaugurated—that of serving only two meals a day, breakfast and dinner, at strange and unearthly hours. Nobody understood exactly what entering the danger zone had to do with dispensing with the third meal, or whether it was because the cats were running short, but there was nobody to argue with. Patronage of the canteen increased.

And then about noon on December 15th a wonderful thing took place. From various points on the horizon black smoke smudges appeared. Field glasses were at a premium, while everybody struggled for a look. The smudges slowly revealed themselves as vessels of some sort. They came closer, and when they were close enough to really be seen, it was as if a flock of half a dozen gaudy butterflies had appeared out of space, to circle about the *George Washington*.

The camoufleurs had done themselves proud on those six destroyers—camoufleurs with an imagination and plenty of paint. Every color of the rainbow, and many colors that would be total strangers to a rainbow were represented in the brilliantly hued stripes, bands and

spots that adorned every inch of the ships. Pink, blue, purple, green, yellow, orange, black, scarlet—an explosion in a paint factory would be the only thing approaching it. One destroyer was especially remarkable in that it had a color scheme in which a vivid pink predominated. It had, among other things, not only a pink crow's nest, looking like a pink celluloid puff box, but a pink cannon. As somebody said, "Gosh, I've seen a lot of things, but I never saw a pink cannon before."

The days of December 16th and 17th will always stand out vividly in the memory of every person on the ship. The storm that met the *George Washington* as it approached the Bay of Biscay was one that even the oldest sailor in the convoy will never forget. Beginning on Sunday, the 16th, with a heavy gale and a sinister sky, the storm increased steadily in violence for two days. As early as Sunday afternoon the sea was rising so high that even those on the upper decks were drenched. The ship heaved like a balloon, and the fantastic little destroyers were tossed about like toys, now poised, almost vertically on the crest of a mountain-high wave, then dashed down and often half submerged into a churning valley of the sea. Through the gathering gloom lights kept winking from the *Huron* and from the destroyers, but still no lights were permitted on deck.

There was little sleep for any one that night. Above the crash of the storm could be heard the crash of crockery, tin trays, furniture and persons who had lost their balance and fallen in the dim corridors where only the faintest of blue lights showed. Furniture and baggage skated hither and yon as the ship rolled and plunged. Down in G-1 mess kits and other loose equipment of the men clattered back and forth across the floor in an indiscriminate mass, all night long.



When morning broke there were scenes of utter chaos in the staterooms and in the quarters of the enlisted men. Outside the sea presented a terrible series of hills, valleys and mountain ranges of water. The *Huron* and most of the destroyers had scattered somewhere in the smother of the waves. As for the *George Washington*, half the life boats on the port side had been carried away, and fragments of others dangled from the davits. Several of the lookout stations had been smashed like paper boxes and four men on duty at these posts had been washed overboard.\* The engineer of the ship said that this gale, running eighty-five miles an hour, was the worst he had ever encountered in all his fifty-three trips across.

Before long the order came to clear the decks, and no one was allowed above for the balance of the day except those whose duties absolutely required it. Those who tired of clinging to their bunks spent the time devising new ways of dodging furniture and other rapidly moving bodies. Down in the men's quarters there were still a hated few who were neither too sick nor too scared to joke. It was too rough for the popular pastime of rolling dice, but every time the *George* rolled over on her side these men gambled on whether she would ever come back up again. When meals appeared they slid off the tables, but they were not worth bothering much about anyway, as the cuisine had fallen to a low level. It must have been about this time that boiled cabbage made its appearance at breakfast.

The next day, December 18th, was very cold, but the sea had gone down enough to permit going on deck again. The *Huron* reappeared, five of the destroyers found their way back to the convoy, one by one, and a wonderful rain-

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\*Some reports were to the effect that six men were lost, but this was not confirmed.

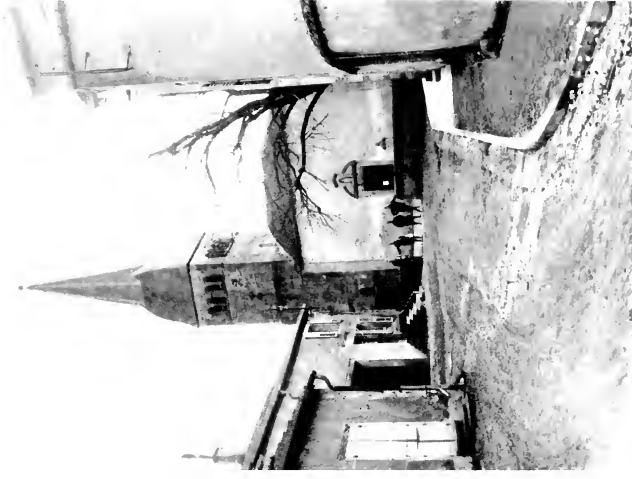
bow arched itself across the sky. Every one wandered about inspecting the havoc wrought by the storm, and those who had been assigned to lifeboats on the port side gazed gloomily at the remnants of their erstwhile means of escape in case the ship were torpedoed. The next day passed uneventfully and the *George Washington* made good time. Along toward evening the convoy split, and the *Huron* steered off, presumably for St. Nazaire, while the *George Washington* continued on. A lighthouse was sighted, and excitement ran high.

December 20th was a big day in the history of 32. Those who were on deck early were rewarded with some very fine displays of smoke screens from the destroyers to the starboard. It was by this time generally known that the destination was Brest and the boat was now entering the very worst of the danger zone, that which lies just outside the vigilantly guarded areas of the harbor. Precautions against submarines were doubled. The guns were manned, and the destroyers skirted nervously around as the big ship zigzagged on her course. Suddenly, somewhere off the starboard side, a dark object bobbed into view. It was all the work of a moment. The ship's siren screamed its blood-curdling wail. A gun boomed. There was a tense moment of waiting, and then more dark objects, dozens of them—a school of porpoises splashed toward the ship! The thrill of excitement that passed over the boat turned to laughter, but respect for the navy increased. They were ready. The incident bespoke alertness with a capital A.

Finally the lighthouse loomed up dimly, apparently rising directly from the ocean itself, and looking in the distance no larger than a clothes-pin. Far away shadowy land began to appear. A big Stars and Stripes went up at the stern of the boat, instead of the smaller flag.

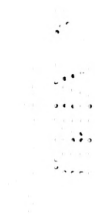
A few minutes before 11 o'clock, with a mighty roar of

THE CHURCH



THE ROAD TO SURIACVILLE





engines, two Italian biplanes, showing red, green and white on the under sides of their wings, appeared and circled about the ship, sometimes so low that the pilot and observer were clearly visible. From this time on there was so much going on that it was harder to watch than a three-ring circus. Queer white houses appeared as the transport slowly made her way along, and the land slipped by; funny little boats with maroon-colored sails drifted into view, manned by sailors wearing wooden sabots. Slowly the *George Washington* felt her way into the harbor of Brest, and came to anchor a mile or so out from land, being too large to dock. Boats of every kind swarmed about her—boats filled with sailors from the French navy, in blue, with little red powder puffs on their caps; English, French and American officers climbed up the starboard ladder; two vast captive balloons, like huge bloated sausages, floated above, towed now this way and now that.

Cigarettes and coins were tossed overboard to the crowding little boats below, and the Americans came up against the French language for the first time. The day itself was beautiful, warm and sunny, and evening came with every one still on board, and the sun going down behind the gray hills against which the ancient buildings of Brest stood out.

December 21st found the aggregation still stationary in the harbor and the lovely weather changed to a dull rain. All day long, and far into the night, the winches were at work, swinging up apparently inexhaustible stores of supplies from the hold aft, and packages that looked like Christmas presents from the forward hold. Into the yawning chasms of the open hatches the great rope slings swung, to emerge filled with bundles, bales, sacks and boxes of every description, while the winches squeaked and complained.

In the harbor was a submarine, flying the French flag, but alleged to have been captured from the Germans, and once one of the captive balloons drifted so close that it was easy to see the observers scrambling about. Orders came for the luggage of Base 32 to be ready at 4 o'clock, and it was gotten ready, but did not go ashore. Many of the outfits on board left, and there were general good-byes. Lights twinkled ashore, and two big searchlights talked to one another.

Two more days of impatient waiting dragged by. One outfit after another climbed down the ladders, entered launches, and were borne away, but Base 32 stayed on. A few of the officers managed to get ashore, to reappear later in the day resplendent in Sam Browne belts. A flock of quartermasters, engineers and Ambulance Company No. 15 departed and were seen no more. The unloading of cargo went on endlessly, night and day, with a detachment of French sailors helping in the work. December 23rd found the unit impatient and discouraged. There was a general lack of animation, made more pronounced by an outbreak of measles. Those who were not ill went to church on E deck. The word had been passed around, however, that the hospital was surely going ashore the following day, and their baggage was all sent out that afternoon.

December 24th was another big day for Base 32, and they flattered themselves that it was also a big day for Brest, though possibly Brest didn't realize this. Somehow the crowd was gotten aboard the lighter *Dinardaise*, and was borne bouncing away across the water of the harbor—which was farther across than it looked—while from the rails of the *George Washington* came farewell shouts from those who still remained aboard, an especially popular form of good-bye being "Here's hoping you don't get any business!" which, after all, was fair

enough. Through the boats crowding about the docks behind the breakwater the lighter made her way, while, looking back at the *George Washington*, one realized for the first time the great liner's gigantic size.

And so, sometime during the forenoon, the unit set foot—actually set foot—on the soil of France, while the natives gathered round to witness the arrival of this latest group of *les Americains*. They were a trifle late, but at that they had beaten a lot of the quartermasters, most of the aviators and all the stevedores ashore.

This first closeup of La Belle France did not reveal her as so very belle, after all. It was muddy and wet, and the natives, who grouped at the end of the street leading from the dock, looked rather shabby, and there was a great prevalence of black among the dresses of the women. One old citizen, in a long flowing cape, made the unit a sweeping bow as the column advanced.

The immediate destination was the railroad and the advancing hosts of the medical corps climbed hill after hill and numerous stairways to reach it. The station was found to be crowded with a variegated assortment of French soldiers in horizon blue, Turcos, British, and a few Italian soldiers, doll-like French children, old peasant women in wonderful caps of Breton lace, and a few other civilians. The luggage was brought to the station and placed under guard. Arrangements for entrainment and travel rations occupied a few of the officers, and the balance of the unit drifted around enjoying the strangeness of the crowd.

Some strolled off to the wall that flanked the open space across from the station, and gazed down at the city of Brest, set in terraces on the hills, old houses, tall and thin, with chimney pots, and set in walled gardens, with a surprising amount of greenery for the season, and narrow, twisting streets.

Finally when it became known that the train would not leave before evening, permission was given to leave the station, and most of the unit left in quest of food. They got it, eventually, sometimes by means of sign language, or, in extreme cases, by resorting to drawings. The sights of Brest were taken in on a marching tour through the city, and everywhere the procession passed traffic halted. It was Christmas Eve and the hospital unit put up a strong opposition to a French circus that was vainly endeavoring to draw a crowd.

Rising almost out of the harbor was an ancient chateau, and many of the new arrivals took advantage of the few loose hours before the train was due to start to investigate this structure, which dated back an inconceivably long way—part of one tower, we were assured, having been built by Julius Cæsar. Included in the architectural curiosities of the chateau were battlements, moats and dungeon keeps, and one pleasing arrangement where a victim was dropped through a hole in the floor to land, several stories below, on a collection of spikes. From the battlements one could get a wonderful view of the crowded harbor, and many of the visitors took their last look at the *George Washington*, majestically at rest in the bay.

Back to the *chemin de fer*, where on a siding waited a curious special train composed of an engine built along the general lines of a tea-kettle, but with a peculiarly shrill and defiant whistle, and an endless string of cars like dry goods boxes—but, at that, a dream of luxury compared with the “Hommes 40, Chevaux 8” cars that the less fortunate outfits traveled in.

The roll was called again and again. Travel rations were distributed to each compartment. A grand scramble ensued while the unit got aboard. The enlisted men in the third-class cars, seven or eight to a compartment, and



the officers and nurses in the elegantly upholstered coops of the *première class* into which six persons and their luggage could be jammed.

At five o'clock everything was ready. The engine gave its loudest and most defiant toot, and the unit was off. Their destination was unknown. They had no idea whether they would reach the end of their journey in a few hours or a few days. As it happened, they were on the road one day and the better part of two nights, and by that time they had discovered things about French travel that made the most moth-eaten American day coach look, in retrospect, like the private car of a railroad magnate.

The train scuttled across France, pausing now and then at stations with romantic French names, where there were always troop trains loaded with French soldiers sitting in the cars, under the cars, and on the cars. At every station the Americans hung out of the windows, and whooped the glad news of their arrival to the French. Supper was a gladsome meal, including such delicacies as "tinned willie," jam, beans and bread. These edibles were piled indiscriminately on the floor, or in the already overloaded baggage racks above. There was apparently but one can opener to the crowd and plaintive wails of "*ou ést le can opener?*" rent the air as that priceless implement made its way up and down the train. Finally night fell, and the crusaders went to sleep as best they could with their feet in the groceries.

As for Christmas day, Bishop Francis, whose duties included that of mail censor, later made the lament that in June the members of the unit were still eating their Christmas dinner on the train, but it was an unusual sort of Christmas, let any one deny it who dares, and the letter writers were to be excused. Christmas day then dawned about seven o'clock with the train scuttling across sunny France in a snowstorm. All on board had been up for

hours, for getting up was a simple operation consisting principally of disentangling one's self from the canned goods. Breakfast was served from cans, after more frenzied paging of the can opener, and by some miracle hot coffee was obtained somewhere along the route. French oranges, small and sour, added the one festive note to Christmas dinner.

All would agree that they spent several years on board that train that merry Christmas day. All concerned had reached such a state of dishevelment that they resembled Coxey's army, and rumors were to the effect that high wassail was being held in the awful coaches occupied by the enlisted men, who were endeavoring to forget their misery in *vin rouge*. Late in the afternoon the train passed through Troyes, a large French town, where it made the most protracted stop of the trip, and some time at night it went through Chaumont, General Pershing's headquarters.

About three o'clock on the morning of December 26th the train stopped at an unimposing little station, and its sleepy and unsightly occupants were routed from their luxurious slumbers. It was not until then that the destination became generally known. The first little group off the train plodded through the snow, up to the station, and straining their eyes finally made out the letters of the station sign, "C-O-N-T-R-E-X-E-V-I-L-L-E." No one knew where Contrexéville was. No one cared. Joyfully all concerned would have detrained directly back of the German lines to have escaped from the train. The snow was two feet deep, and it was cold with the piercing dampness that only France seems able to achieve.

Darkness often shrouds a town with an element of mystery to an arriving stranger. Contrexéville seemed queer that first night. The impression, as the unit marched wearily through the streets, was one of surprise. The

handsome buildings, the dark evergreens against the snow in the park, the stately columns of the collonade and the broad streets all struck notes of incongruity. Obviously a small town, but how unlike the ordinary French village! Weary as the newcomers were, they could not help but wonder what manner of place they were in.

French civilians guided the unit to their quarters, the officers to the Hotel Souveraine, the nurses to the Hotel Continental, and the enlisted men to their less imposing quarters, later designated as the "Glass House" and the "Old Theatre." Cots had been prepared, and a steaming hot drink, alleged to be coffee, was welcomed for its warmth. The quarters were cold and damp, but a feeling of relief was general. The end of the journey was reached. It was no longer necessary to sleep in layers as it had been on the train and one might, with the help of Providence, get a bath sometime in the future.

## IV

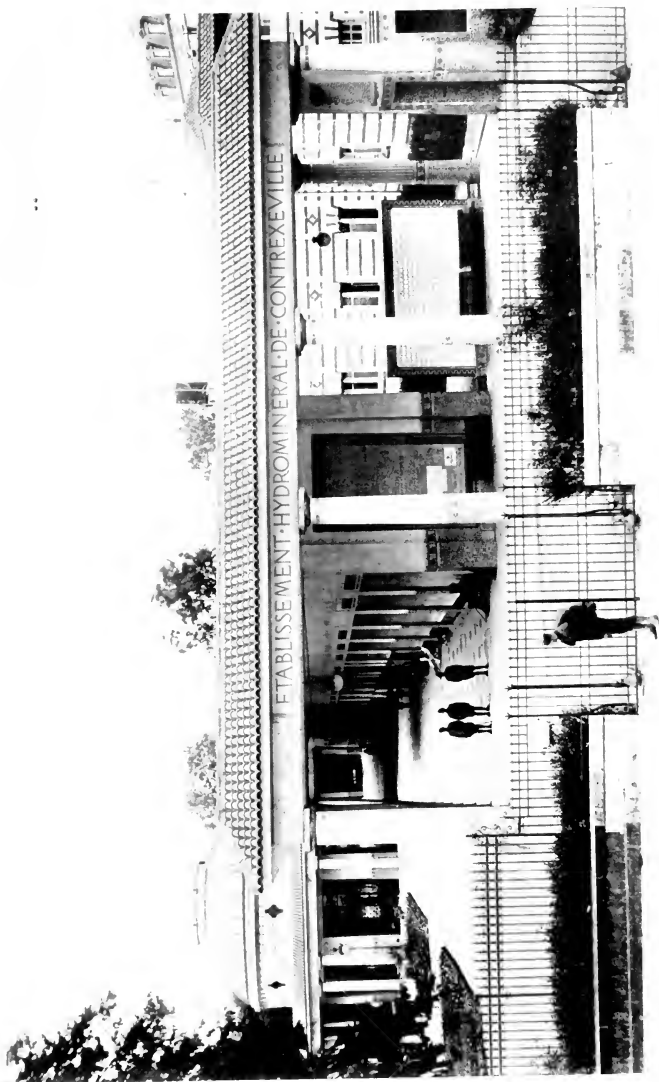
### CONTREXEVILLE

**C**ONTREXEVILLE is located in the Department of Vosges, about 370 kilometers east and a little south of Paris, on the railway that connects Nancy and Langres. It lies at an altitude of 1,100 feet, in a narrow sheltered basin, completely surrounded by the foothills of the Vosges Mountains. Neufchateau, the only neighboring town of any importance, is about twenty nine kilometers to the north.

Celebrated for more than a century because of the medicinal and therapeutic qualities of its numerous springs, Contrexéville has for years been a popular watering place. As early as 1760 a certain Dr. Bagard, physician to King Stanislas of Lorraine, discovered the unusual properties of the Source de Pavillon and brought them into public notice. Subsequently chemical analysis of its waters revealed a variety and combination of minerals that drew the attention of the medical profession of all parts of France. The reputation of Contrexéville as a watering place was established. Courses of treatment were recommended and prescribed, and the waters of the Source de Pavillon were bottled and shipped extensively. During the years just prior to the war Contrexéville counted many people of fame and nobility among its summer guests.

Contrexéville, because of its climate, is essentially a summer resort, and its population, largely transient, is of a class that demands attractive lodgings and modern conveniences. Because of this, Contrexéville differs greatly from the majority of small French towns. Among other things it boasts of concrete sidewalks, an electric light





BATH HOUSE

COLONNADE  
ETABLISSEMENT HYDROMINERAL DE CONTREXVILLE

SOURCE DE PAVILLON

plant, and a general sewerage system. Three beautiful parks, several tennis courts, bowling greens, and the Casino offer recreation and diversion. The River Vair, a small stream that runs through the town submerged under a concrete promenade, furnishes the water supply for the bathhouse of the Societe des Eaux. This building, known popularly as the Colonnade, is located in the most central of the three parks, and is probably the handsomest structure in Contrexéville. With its red tile roof and its long line of stately blue and cream columns, it resembles some magnificent exposition building more than anything else. The bathhouse proper, which occupies a circular structure opening off the center of the Colonnade, is equipped with dozens of the most modern blue and white tiled bathrooms, spacious dressing rooms, showers, and a number of other rooms for X-ray and special medical treatment. The inner side of the Colonnade furnishes space for a long row of small shops, while toward the center, jutting out from the open side, a magnificent dome houses the Source de Pavillon. Across from the Colonnade, on the other side of the park, are the Hotel de l'Establissement, an ancient and rather dilapidated structure, and the Casino, a beautiful and thoroughly modern building enclosing a charming theater, gaming rooms, and handsome salons. Outside the park, scattered through the entire town, are a number of large hotels and dozens of villas and smaller hostelryes. Of these the Cosmopolitain-Palace is the largest and most important, an imposing five-story building set on the hill beyond the park, and commanding a view of the country for miles around.

After the war began it was soon apparent that Contrexéville possessed peculiar advantages as a site for a military hospital. Located on an important railway in the advance section of operations, approximately fifty miles behind the lines, its selection as a location for a base

hospital was a natural one. A number of the larger buildings were admirably adapted for hospital purposes, and long before the advent of America in the war these had been requisitioned by the French Government and turned over to the French Service de Santé and used as hospitals. Following the arrival of the earlier American troops, these buildings, together with others similarly requisitioned, were sublet to the United States Army, and were evacuated by the French late in 1917. The buildings which were to be used as hospitals were: Cosmopolitain-Palace, Hotel Royal, Hotel de la Providence, Hotel de la Providence Annex, Hotel de Paris, Hotel Continental, La Souveraine, Hotel de l'Etablissement, Hotel Harmand, Hotel Martin Felix, Hotel Thiery, Hotel Martin Aine, and the Casino.

Of these the Cosmopolitain-Palace, together with the Hotel de Paris, Hotel Royal and Hotel de la Providence and Annex, were grouped in close proximity in the upper part of town, and were divided from the others by the park of the Etablissement des Eaux. These buildings were assigned to Base Hospital 32. The second group of approximately the same bed capacity, was located within and below the park, and was reserved for Base Hospital 31; a unit organized in Youngstown, Ohio, under command of Major A. E. Schlanser, which was scheduled to arrive in Contrexéville about January 1st.

In addition to the five hospital buildings assigned to 32 the following buildings were leased for other purposes: Hotel Moderne Annex for headquarters officers, Cosmopolitain-Palace Garage for garage, Hotel de Paris Annex for officers' quarters, the Jean Cretaux Garage for a warehouse, and a glass-enclosed sun porch built against one side of the Hotel Moderne, together with an old theater on the hill back of it, for enlisted men's quarters. Other enlisted men, principally non-commissioned officers, were



quartered on the third floor of the Moderne Annex, and the second story of the Cosmopolitain Garage. For the first few weeks in Contrexéville the nurses were quartered in the Cosmopolitain, but later, when that building was being rapidly prepared for hospital purposes, the Hotel Moderne was leased, and served as nurses' quarters for both Base Hospitals 31 and 32. Shortly after the arrival of Base Hospital 31 the Paris Annex was turned over to their officers, and the officers of Base Hospital 32 moved into the Villa Plaisance and the adjoining Villa Salabury.

Preparations for the reception of Base Hospital 32 on the night of December 25th-26th had been made by Major East of Base Hospital 36, of Detroit. This unit, together with Base Hospital 23, of Buffalo, was already stationed at Vittel, a similar, but somewhat larger summer resort town about five kilometers north of Contrexéville. Temporary quarters had been arranged for and equipped with iron cots and blankets taken over from the French.

The first few days at Contrexéville were spent in arranging more comfortable personnel quarters and providing for the mess. Offices were established temporarily in the Hotel Continental, and the Continental kitchens and dining rooms were used until some time after the arrival of Base Hospital 31. French rations were provided pending arrangements with the American Quartermaster Corps.

A general plan for the hospital organization, to conform with the buildings provided, was developed by Majors Clark and Beery, but the actual work of cleaning and preparing these buildings for occupancy was delayed by the non-arrival of equipment, and also by the fact that some of the buildings were not yet completely evacuated by the French. The bed capacity, which had hitherto always been figured as 500, was increased by the chief

surgeon's office to 1,250, and notice was given that the equipment for the additional 750 beds would follow the shipment of the original 500. In the meantime leases and *etat de lieux* were signed, and the peculiar intricacies of the French system of renting were explained. In almost all of the buildings certain rooms had been reserved and sealed by the owners for the storage of furniture, and in the case of the Cosmopolitain an additional lease had to be effected to cover the use of the miniature elevator which occasionally could be got to run. The cellars of the Cosmopolitain, with the exception of the kitchens, were also reserved and sealed, and were rumored to contain fabulous quantities of champagne and ancient wines.

A survey of the five hospital buildings showed that they were all wired for electricity and possessed independent water supplies. Most of the buildings were equipped with bathrooms, and the plumbing facilities, as compared with most French hotels, were generally good. All of the buildings had septic tanks draining into tile pipes in the bed of the River Vair.

It was expected that the work of the hospital would be to a large degree surgical, and the Cosmopolitain, on account of its size, and because its spacious, well-lighted salons were admirably adapted for surgeries, was selected as the main surgical hospital. The Cosmopolitain was a six-story structure faced with stucco and trimmed with sandstone. Owing to the slope on which the hotel was constructed, the first floor opening on to a spacious lobby, became the basement farther back, and housed the kitchen and a small central heating plant. This heating plant, although probably sufficient for the summer season during which the hotel operated, was entirely inadequate for winter weather, and was supplemented by small heating stoves. On the second floor were the salons and dining rooms, which were to be converted into surgeries, dress-

Chemin de la  
Folie.

# PLAN VILLAGE OF VOSGES

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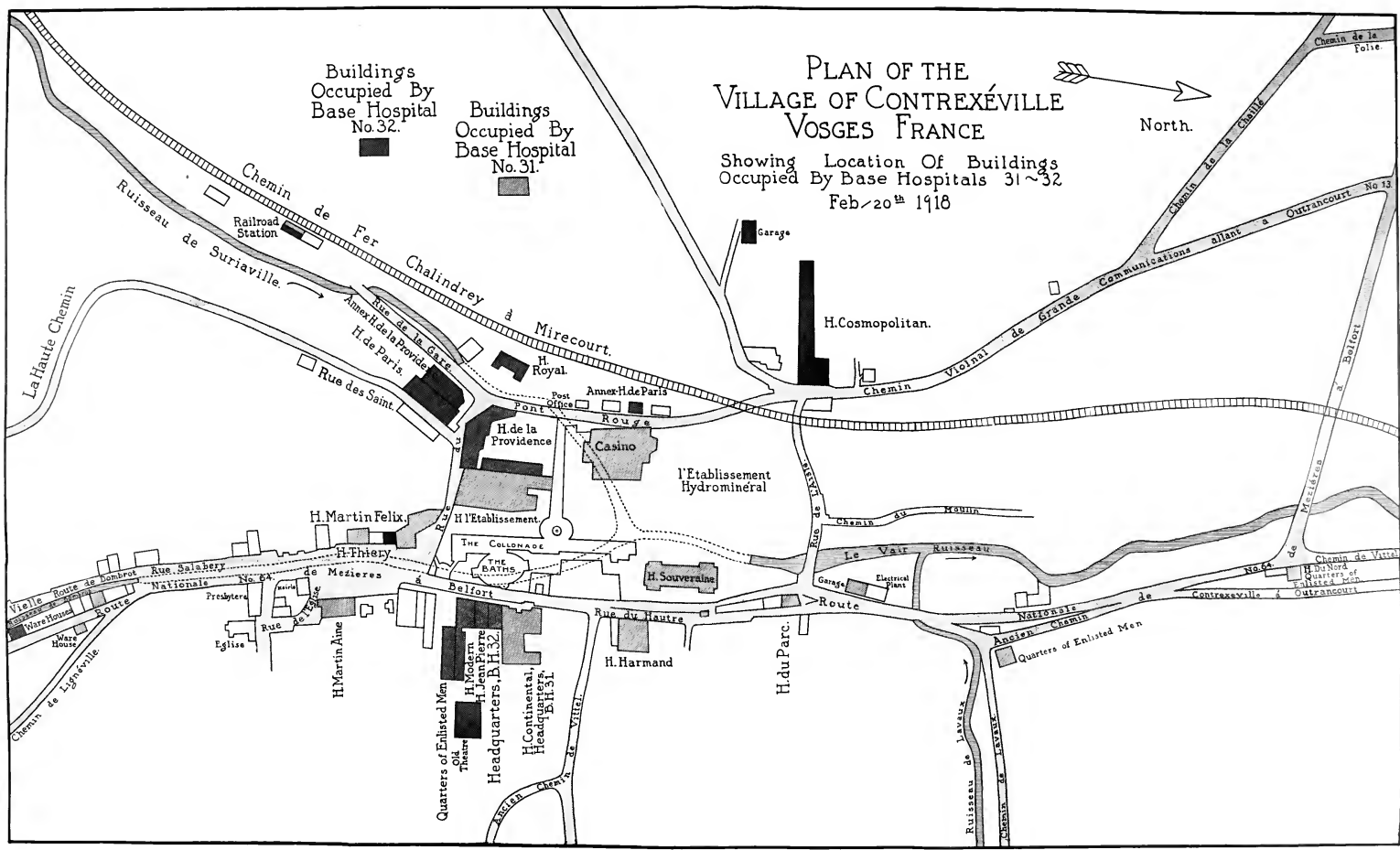
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Buildings  
Occupied By  
Base Hospital  
No.32.

Buildings  
Occupied By  
Base Hospital  
No. 31.



ing rooms and the larger wards. The rooms off the corridors leading to the rear of the building on this floor were assigned to the various specialists on the staff, and the dental rooms and pharmacy were also located here. The third, fourth, fifth and sixth floors were almost identical in plan, each containing approximately twenty-five bedrooms of varying size, the majority of them with connecting doors, and a few with baths. The capacity of the Cosmopolitain for hospital purposes was estimated at 500 beds, and it was decided to use practically all of the original Red Cross equipment to furnish this building, and to depend upon the medical supply depots for additional equipment for the others.

The remaining four buildings, the Paris, Providence, Providence Annex and the Royal, were located about two blocks down the hill from the Cosmopolitain, and were grouped in close proximity on, and near, the corners of two intersecting streets. Of these buildings the Providence was the largest, with an estimated bed capacity of 225. Ancient, and in poor repair, this building was a four-story V-shaped structure with a long wing extending at right angles on either side of the entrance. Diagonally across the street from the Providence, on the opposite corner, was the four-story Hotel de Paris, with a bed capacity of 200, and back of, and adjoining it, was a somewhat smaller three-story building, the Providence Annex, accommodating about 125 beds. The Hotel Royal, a modern structure which was completed just before the war, was located directly opposite the Providence Annex. The Royal was a four-story building, faced with stucco, each floor containing fourteen or fifteen very good rooms, some with baths. It had never been used by the French, and was in excellent condition. Back of the Royal, and included in its lease, was a small building accommodating some ten or twelve beds which it was planned to use

as an isolation ward for contagious cases. The normal bed capacity of the Royal was placed at 200.

The first steps in organization were the official designation of the different hospital buildings by letters and their division and assignment to the surgical and medical sections. The Cosmopolitain, Hospital A, which was to be the principal surgical building, was to be supplemented by the Paris, Hospital B, an auxiliary surgical hospital which was designed to take care of the overflow from A and to handle convalescent and minor surgical cases. The medical section, with its headquarters offices in the Royal, was to comprise Hospitals C, D and E, the Providence Annex, Royal and Providence, respectively. The pharmacy supplying the medical section was to be located on the first floor of the Providence, together with the medical laboratory and an auxiliary X-ray outfit. A room on the ground floor of the Cosmopolitain was to serve as a hospital supply room for all of the buildings. From here pharmaceutical supplies would be issued to the two pharmacies, and all other supplies issued direct to the individual buildings on requisition.

Practically all of the original equipment had preceded the unit to France, and, with the exception of the truck and the three ambulances, had been forwarded to the Medical Supply Depot at Is-sur-Tille, where it was stored pending the arrival of the hospital at Contrexéville. The truck and ambulances had been unloaded at St. Nazaire, where they were to be claimed and driven overland to their destination. A detail in charge of Sergeant George Swaim was assigned to this task, and the trip, which was a thrilling one, through a strange country over ice-covered mountain roads, took the better part of a week. Much of the driving was done at night without lights, and the roads were often obliterated by their deep covering of snow.

The early days of January were days of busy preparation. By this time the first few cars of original equipment had begun to arrive, and night and day shifts, under the direction of Lieutenant Funkhouser, were organized to expedite the unloading. Details and trucks from Base Hospital 31 assisted in this work. The headquarters offices, which had been temporarily established in the Hotel Continental, moved into their permanent location on the second floor of the Moderne Annex, and the enlisted men's mess, which had been served jointly by Base Hospitals 31 and 32 in the Continental dining room, separated and operated independently. Messes for 32's men were established at the Cosmopolitain and Providence, and for the officers' and nurses in their respective quarters.

It was evident that the first task that faced the unit was to clean up the buildings and fit them for occupancy. Many of the hotels, especially those that had been occupied by the French, were turned over to the unit in an extremely unsanitary condition. There was a natural accumulation of refuse, floors were to be scrubbed, windows and woodwork washed—in fact a general housecleaning was necessary before furniture and equipment could be moved in. In addition to this there was a considerable amount of plumbing, electrical and carpenter work essential to fit the buildings for hospitals. The surgeries, laboratories and X-ray rooms required special lighting, and wiring for electrical apparatus. Sterilizing equipment was to be installed, and additional sinks and drains were required in some of the kitchens. Partitions had to be built and benches and tables constructed. The hospital was extremely fortunate in having among the enlisted personnel men who were ably qualified to accomplish this important work. Notable among these were McElwayne, Stuvell and Holloran in the plumbing; Gaither, Sertell and Iverson, carpentering; Drake and Cook, general elec-

trical work, and Magee, whose installation of the X-ray equipment elicited praise from many X-ray technicians in both the American and French armies. The material required for all these important improvements was purchased under the direction of Lieutenant Bushey on motor trips to Nancy, Epinal and Neufchateau.

The frequent transfers and changes in personnel which were destined to mark the history of the unit during their entire period of service had already begun. On December 29, 1917, the following nurses, together with a small detail of enlisted men, were transferred to Base Hospital 15 on detached service for several weeks' temporary duty: Olga N. Anderson, Martha R. Berger, Nellie M. Birch, Bertha E. Boyles, Nellie B. Davis, Maud F. Essig, Susan Genolin, Mary B. Houser, Mary Kennedy, Mary F. Kochman, Mary Mangan, Margaret McCoppin, Mary Ruth McBee, Estelle F. Miller, Edna Mowrer, Mary E. Mullen, Mayme O'Connell, Florine Ostenzi, Elsie Peacock, Lena L. Payne, Evelyn Potter, Amy A. Prosser, Nellie Rock, Eleanor C. Ryan, Ida A. Scholer, Golda F. Smith, Ruth G. Totten, Alys Weitendorf and Ruth Wright. Early in January Father Emmanuel Bouter was assigned to the unit as official interpreter, and Benjamin Cotharin, Albert Daugherty, Theodore Plumb, Whitney Porter, Charles Stough, Charles Selch and Albert Bartle, of the enlisted personnel, all of whom had been removed from the boat with measles upon its arrival and transferred to the U. S. Naval Hospital at Brest, were returned to active duty with the organization.

It was about this time, too, that the unit learned the sad news of the death of May Berry, one of 32's nurses, who was taken seriously ill on the voyage over, and who died of pneumonia, December 30, 1917, at the United States Naval Base Hospital No. 1 at Brest. Miss Berry is said to have been the first American nurse to die on foreign soil during the war.





ENTRANCE TO THE GLASS HOUSE



INTERIOR, THE GLASS HOUSE



By the middle of January all of the hospital buildings with the exception of the Royal, which was still in the process of leasing, had been cleaned, washed and scrubbed and the work of furnishing and equipping was well under way. Cars were unloaded and the contents hauled to the medical supply warehouse, where the crates and cases were unpacked and the contents distributed to the various buildings. Part of the equipment containing the additional 750 beds, together with their complement of mattresses, pillows, sheets and blankets, had arrived and was being installed in Hospitals B, C and E.

These beds were a narrow, low French type, with metal slat springs, and compared unfavorably with the white enamel hospital beds of the original equipment, which were being set up in Hospital A. It might be mentioned here that Hospital A, with its original Red Cross equipment for 500 beds, became, when it was ready for service a few weeks later, one of the best and most perfectly equipped surgical hospitals in the A. E. F.

The first official inspection of Base Hospital 32 was made on January 17, 1918, when Colonels Stark and Reno and Lieutenant-Colonel Fife of the chief surgeon's office arrived in Contrexéville to inspect the progress the hospital was making in equipping and preparing the buildings for service. It was rumored at this time that the hospital might be pressed into service at an early date, and the rush of preparations was stimulated to an even greater degree. In order to take care of any emergency the staff was organized tentatively as follows:

Major H. R. Beery, Commanding Officer.

Major E. D. Clark, Director.

Major C. B. McCulloch, Adjutant.

Captain Charles D. Humes, Registrar.

Lieutenant F. P. Bushey, Quartermaster.

## SURGICAL SERVICE.

Major E. D. Clark, Chief.

*Hospital A—*

Major C. B. McCulloch, Officer in Charge.  
Captain Lafayette Page, ear, nose and throat.  
Captain H. F. Byrnes, ophthalmologist.  
Captain Eugene B. Mumford, orthopedist.  
Lieutenant R. C. Beeler, roentgenologist.  
Lieutenant J. W. Scherer, dentist.  
Lieutenant J. V. Sparks, dentist.

*Hospital B—*

Captain Alois B. Graham, Officer in Charge.

## MEDICAL SERVICE,

Major Bernays Kennedy, Chief.

*Hospital C—*

Lieutenant Joseph W. Ricketts, Officer in Charge.

*Hospital D—*

Lieutenant Robert M. Moore, Officer in Charge.

*Hospital E—*

Lieutenant Leslie H. Maxwell, Officer in Charge.

The nursing personnel was also organized and tentative assignments made to the different sections.

The weather, which had hitherto been extremely cold and disagreeable, turned suddenly warm. The snow disappeared, revealing hillsides surprisingly green, and for three weeks the hospital enjoyed a welcome succession of warm, sunny days. With all the rush of preparations and organization work, sufficient leisure time was found for occasional long walks into the surrounding country and exploration trips into quaint little neighboring towns. Early in January some one discovered the Ferme des Eveques—a charming little villa, nestling among the wood-covered hills a short distance out from town. Here a nine-hole golf course had once attracted throngs of





OFFICERS' QUARTERS, RUE SALABERY



THE PARK FROM THE NORTH ENTRANCE

visitors from Contrexéville. The golf course now had been abandoned to the sheep, but the villa itself, with its excellent cuisine and well-stocked cellars, had lost none of its charm, and became a popular objective for afternoon walks and Sunday supper parties. Vittel, similar to Contrexéville in many respects, and larger, also attracted many visitors. Outrancourt, Suriauville, Ligneville, Bulgneville and Dombrot—all quaint little villages, typically French—afforded a variety of interesting walks.

On January 24th the unit received its first large mail from the states, and on January 28th the first social event to break the strenuous rush of preparation occurred at Vittel when the officers of Base Hospital 23 gave a dance to which the officers of the other three hospitals of the center were invited.

By the first of February, although the work of furnishing and equipping the buildings was far from complete, Base Hospital 32 was nevertheless in a condition for emergency service if the necessity arose. The unit at this time was deprived of the leadership of Major Beery, whose health failed under the strain of all this early work, and who was transferred to Hospital A, where it was hoped a complete rest might restore him to active duty. Subsequently Major Beery was relieved from duty with Base Hospital 32 and sent to Base Hospital No. 8, and from here he was transferred to the United States on March 1. During Major Beery's illness and after his transfer Major Clark acted as commanding officer, and it was under his leadership that the buildings were prepared and the unit organized for active duty.

The month of February was devoted to the final details of preparation. Additional supplies were requisitioned and received from the medical supply depots and from the Red Cross warehouse at Neufchateau. Authority was granted to take over any necessary items of equipment

from the French Service de Santé, and numerous articles of hospital furniture, surgical and pharmaceutical supplies were acquired in this manner. Under the direction of Sergeant Callis the hospital kitchens were equipped and organized. Negotiations were started by Lieutenant Bushey for the leasing of the power plant, which had heretofore been under municipal control. Telephones were installed by the United States Signal Corps and arrangements were made with the mayor of Contrexéville for the use of two small fire pumps of doubtful efficiency, a hundred feet or so of hose, and the few ladders which comprised the town's fire equipment.

Meanwhile other events of importance were transpiring. The Y. M. C. A. and the American Red Cross—two organizations that were destined to play an important part in the comfort and welfare of the hospital and its patients—made their advent in Contrexéville. The Y. M. C. A. "hut," which was located in the "Salle Chaude" in the center of the Colonnade, opened on February 8th with a house-warming party and a band concert. Besides the canteen, which offered a variety of cigarettes, candy and odds and ends, the hut was equipped with writing tables, pool and billiard tables and a piano. The Y. M. C. A. activities in Contrexéville were in charge of Mr. Percy McFeely. Additional attractions and entertainments were added from time to time, and the "Y hut" became a popular loafing place during leisure hours.

The first representative of the American Red Cross to arrive at Contrexéville was Captain Laurence E. Hitchcock of Cleveland, Ohio. The work of the Red Cross forms too important a part of the history of Base Hospital 32 to be discussed here, and a separate chapter, later in the book, is devoted to the vast scope and diversity of its activities. Suffice it to say, for the present, that the Red



Cross work in Contrexéville reached almost 20,000 American soldiers—and reached them in a dozen different ways. Nothing that could possibly promote the comfort or welfare of the patients or personnel was left undone. To Captain Hitchcock belongs the credit for laying the foundation for this great work and for outlining many of the important plans which were so ably executed by Captain William H. Thompson, who succeeded him in April.

The end of February found the hospital ready for service. In the two months that elapsed since the hospital's arrival an almost incredible amount of work had been done. Dirty, unsanitary hotels had been transformed into clean, shining hospitals. More than fifty carloads of supplies and equipment had been unloaded and installed. One thousand beds were standing, made up ready to receive patients. Kitchens, laboratories, pharmacies, surgeries, dressing rooms and the X-ray and special departments were equipped, organized and ready for service. Contrexéville itself had changed in appearance. Streets had been cleaned, truckloads of accumulated refuse around the various buildings had been hauled away and the grounds had been thoroughly policed.

In the world outside Contrexéville big things were happening. American troops were pouring into France in increasing numbers. Rumors of the impending spring offensive multiplied daily. On both sides of the lines divisions were shifted nervously from one place to another, and on every sector raids and minor actions foretold the mightier operations that were soon to follow.

## V

### HOSPITAL UNIT R

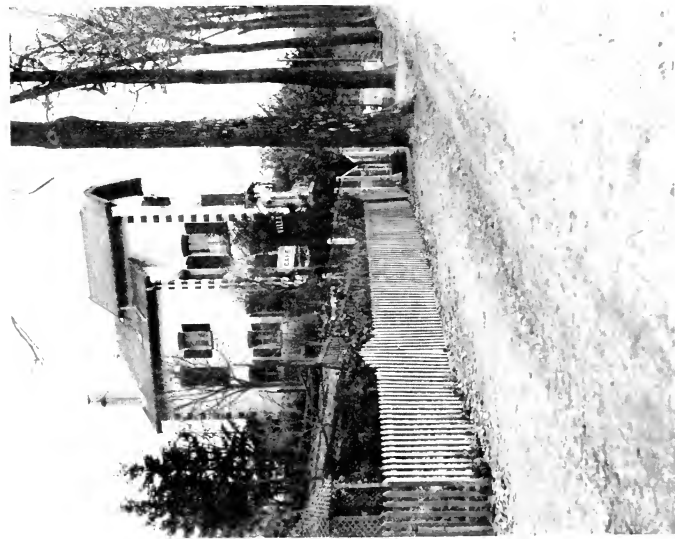
IT HAS been previously noted that the capacity of Base Hospital 32 had been increased, shortly after their arrival at Contrexéville, from 500 to 1,250 beds. To take care of this expansion, additional equipment had been received and installed, but there had been no increase in the personnel.

Early in March information was received from the chief surgeon's office indicating that additional personnel—officers, nurses and enlisted men—would be assigned to the hospital at an early date, and on March 13th this information was confirmed by the arrival of Hospital Unit R.

Hospital Unit R, a southeastern Iowa organization which upon its arrival in France for active duty became a part of Base Hospital No. 32, traces its "ancestry" back to the day the United States declared war upon Germany.

In Fairfield, Iowa, a busy little city of 7,500 persons, lived Dr. J. Fred Clarke. He had served in the Spanish-American War during the entire period of hostilities and while the occupation of Cuba was in progress. In the days of '98 he had been associated with Colonel Jefferson R. Kean, who on April 6, 1917, was in charge of military hospitalization work for the government. The declaration of war was adopted by the congress of the United States in time for all the evening papers of the country to carry the story on that day.

That night a telegram, signed by J. Fred Clarke went from Fairfield to Colonel Kean at Washington. It said, "What can I do to help our cause?" The next day the answer came, giving the fragmentary outline upon which



THE VILLA ST. GEORGE



WAITING FOR THE VITTEL BUS HEADQUARTERS  
BASE HOSPITAL 3



hospital units were to be formed all over the country as a part of the great plan the medical department of the army stood ready to work out and put into operation. Dr. Clarke wasted no time. Within a few days he had consulted other doctors in his community, had talked the matter over with a few of the nurses he knew stood ready to "do their bit" and more, and had checked over a tentative list of enlisted men. Hospital Unit R was under way.

In every county seat in that section of Iowa new Red Cross chapters were springing up like the proverbial mushrooms over night and inactive organizations were instantly alive to the situation. They rallied, at once, to Dr. Clarke's organization and set about assisting it. Letters of inquiry began pouring into his office at Fairfield, asking what could be done to help him. In a little while, out of the chaotic confusion of the first few weeks, the plans began to take some sort of tangible form.

The unit, recruited for service with the United States forces at home or abroad, was to consist of twelve doctors, commissioned officers in the medical corps of the army, twenty-one nurses and fifty enlisted men. It was under the direction of the American Red Cross in the beginning, and remained so for several months. First enrollments were under Red Cross regulations.

While smaller in population than many of the other towns and cities of the ten or a dozen southeastern Iowa counties which fell into line behind the unit, Fairfield remained its home and its center. Here all the administrative work was handled by Dr. Clarke. Far into the night the director of the unit pored over his records, studied his applications, sifted and sorted, adjusted and checked, always in an effort to get the best.

Red Cross chapters in all the towns in that section of the state went to work with a zest making supplies for the unit. Their women worked day and night, rolling miles

and miles of bandages, cutting, stitching and packing hundreds of dozens of pairs of pajamas, bed socks, towels, caps, gowns, masks and other hospital equipment. Money poured into the treasuries and generous checks were sent, with a "do your best for our boys with it," to Fairfield.

The purchase of equipment began, and as the summer wore on additional warehouse room had to be secured in Fairfield to hold the generous contributions of these people of southeastern Iowa. An X-ray machine came from Burlington, a truck from Mt. Pleasant, Ottumwa sent \$10,000 in cash and box after box of supplies. Centerville, Oskaloosa, Keokuk, Washington, Bloomfield, all the centers of population in that section of the state were represented in the vast array of equipment with which the unit was furnished during the summer and early autumn. With the cash contributions which continued to pour into the Fairfield headquarters during this period, surgical instruments, operating tables, beds, cots, kitchen supplies, blankets and the thousand and one other things which go to equip a hospital were purchased. Dr. Clarke supervised all this work. F. C. Morgan of Centerville, Iowa, was the purchasing agent for the unit, and Frank Ricksher, Fairfield banker, was the organization's bursar.

"But, when do we go?" began to be the cry around that part of the country.

Dr. Clarke, who was now Major Clarke of the Medical Reserve Corps, had chosen his fifty enlisted men, and they had been sworn into service as members of the Enlisted Medical Reserve Corps on August 8th, 9th and 10th. Miss Amy Beers, superintendent of the Jefferson County Hospital at Fairfield, which served as the parent organization for the unit, and who had been chosen as chief nurse, was a member of the Army Nurse Corps, and was getting her personnel lined up. Some of the women had already been called into active service in southern canton-





THE GARAGE GANG AND THEIR MENAGERIE



THE OLD THEATRE



ments of the United States. Major Clarke had chosen his twelve officers and they had all received their commissions. There were six captains and five lieutenants. The organization had been officially designated by the War Department as Hospital Unit R, and was one of the two such units Iowa maintained during the war, the other being Hospital Unit K from Council Bluffs, with Colonel Donald MacCray in command.

Then followed a long period of waiting and restlessness and rumor. Every week carried a new story or a fresh version of an old one. The men began to seek transfers into other groups which seemed to have a better chance to "get across." About December 1st came word that the unit probably would not be called out before spring. Everybody settled down for a "long, hard winter."

Then, like the much-prated bolt out of a clear sky, came the orders for Hospital Unit R to proceed to Fort McPherson, Georgia, for training and equipment preparatory for embarkation overseas.

That was on December 11, 1917. By noon the next day the men were on duty at the Fairfield Iowa National Guard armory, where they were quartered until December 15th. On that night at 9 o'clock the enlisted men and the officers left for Georgia, arriving three days later. The nurses were not called into service until the following month.

At Fort McPherson, on the outskirts of Atlanta, the Iowa boys found themselves to be a part of many such groups from all over the country. They were quartered in the same barracks and had a joint mess hall with Hospital Unit B, from Yonkers, N. Y. Across the street was Unit G, from Syracuse, and Unit H, from Fordham, New York City. Close by were Unit I, from Anderson, Ind.; Unit C, from Charlotte, N. C.; Unit W, from Springfield, Ill.; Unit S, from Spokane, Wash., and Base

Hospital No. 26, from the famous Mayo establishment at Rochester, Minn., and so on they went up and down every street in that section of the reserve.

Long, cloudless days were spent on the McPherson drill fields and parade grounds. Still longer nights were spent in the rickety wooden barracks trying to keep warm under a couple of cotton blankets, while the wind whistled through the pine trees.

The boys thought they knew Dame Rumor pretty well before they left Iowa, but they soon found out that they had only a mere passing acquaintance with the lady. They never knew her until they reached Georgia. Six times, from January 1st until February 4th, they were leaving. Once they had the equipment loaded on the train, and twice it was on the trucks on the way to the station. On February 4th, at noon, the unit did pull out for Camp Merritt, New Jersey.

A few changes in the personnel took place at Fort McPherson. Captain John R. Walker, of Fort Madison, Iowa, who was the unit's adjutant, was disqualified for overseas service. He later became camp surgeon at Camp Pike, Arkansas. His place was taken on the unit roster by his brother, Captain Ben S. Walker of Corydon, Iowa, who was in training at Fort Riley, Kan., when called to Atlanta. Henry F. McCullough of Chariton, Iowa, an enlisted man, had applied for a transfer to the air service before the unit was called into active service and received his orders to proceed to Rantoul, Ill., soon after the organization reached Georgia. His place was taken by Joseph A. Duffy, who came to Atlanta from Kansas City.

While the officers and enlisted men were preparing to leave Fort McPherson, the nurses had been called from their homes in various parts of Iowa and from the southern camps where they were in service to Governor's Island, New York. There they were trained and

equipped and joined the remainder of the unit in New York.

Arriving at Camp Merritt on the morning of February 7th, the stay there was devoted to the final stages of equipment for overseas service and short drills and hikes.

On the morning of Saturday, February 16, 1918, the officers and men marched out of Camp Merritt, through a heavy snow, at 3:30 a. m., and boarded a train at Tena-fly, N. J., for New York. On the Cunard docks in that city they were joined by the nurses, and all went aboard H. M. S. *Carmania*. At 4 o'clock that afternoon, in a hard, driving rain, the big gray liner stole out to Ambrose Channel Lightship, where she lay until midnight, then turned her nose north, and Hospital Unit R was off on the great adventure.

The next morning, Sunday, with a brilliant blue sky and a reflecting ocean like a mill pond, they were heading up the east coast of the United States for Halifax. Arriving there the next day, the ship anchored a mile out in the inner basin. Although it was twelve to fifteen degrees below zero all the time, the Iowans used to stand for many minutes on deck at night to see the beautiful harbor, bathed in a full moon's light and touched by the glow of the ever-marvelous northern rays.

On Thursday, February 21st, early in the morning, unusual activity was noticed. Before noon, two, four, six and then seven boats, some battleship gray like the *Carmania*, others zebra-coated in their many colors of camouflage, poked their bows around the bluff and slid in alongside the *Carmania*. The stage seemed set. Everybody was on his toes. But there seemed to be a feeling of waiting; for the chief actor, perhaps. Then he appeared—a sleek, swift, sure-looking cruiser with the silky folds of Old Glory flapping in the sunlight from the stern. Three in a row, and three across, the ships took their places.

With the Stars and Stripes as their guide, the convoy moved. Just as the hills of Halifax were taking their last dip in the winter afternoon's dusk glow the troop-laden ships passed the outpost cliffs and went out to sea.

Then followed fifteen days of smooth seas and seas that were not so smooth. Lifeboat drills became as common as marmalade and tea for breakfast. Standing at attention for sixty-five minutes because "somebody" forgot you were there meant nothing at all in the lives of these young Iowans "sailing the ocean blue" in the face of sleet and snow and wind and possibly submarines.

Old Lady Rumor worked overtime on her job all the way over, but finally, with nothing more exciting than a cable breaking loose on the last night in the danger zone and making every one certain that the boat had been hit by a torpedo, the good ship *Carmania* tied up at the Liverpool docks at 2 a. m., on March 4th. Disembarkation began at 9 o'clock and was finished in time for Captain Herrick and the nurses to get away to France, with only a glimpse of England, and the remainder of the officers and the men to pile on to the funny little English toy cars and take a seven-hour jog to Southampton town.

It rained all the way down from Liverpool. With only a brief stop at Sheffield for coffee the outfit arrived at Southampton at 1 o'clock in the morning. Right alongside the tracks lay a big boat. Everybody said, "We are going right across to France to-night."

But they were all wrong. There was a Canadian officer, who had evidently slept all day in preparation for the event, standing right there to guide these "travelers" to their next stop. Right up through the business section of Southampton the trainload of troops was marched at a cadence which is estimated to be anything from 100 to 500. Out into the residence district, past parks and lanes and drives, they stumbled over the cobblestones without



RUE SALABÉRY, LOOKING NORTH



WAITING FOR THE MESS CALL



a single stop to rest. The crowd began to decide they were marching back to Liverpool, because somebody had forgotten his umbrella, or his ice cream bucket, or some similar army necessity. Finally, after a few hours and a few more miles, the column halted at the Southampton Commons at 4 a. m.

Eight in a tent, plenty of blankets on the floor, but the sweetest words in a long time when the Tommy bellowed, "Now, you'se don't need to get hup huntill ten in the mawnun." And then, with the day, it was like stepping into another world. Leaving Camp Merritt wading through a heavy snow, facing sleet and wind and sub-zero weather all the way across the ocean and then this—perfect spring skies, daffodils nodding their yellow bonnets all along the roadsides, primroses in the window boxes of the little, hedged-in, brick homes, holly bushes with their sparkling berries everywhere, lakes, winding paths. It was a real rest camp.

Five days were spent there, and then on Saturday, March 9th, at noon, the unit marched down to the docks. The boat was ready this time, and at 4 o'clock that afternoon the trip across the channel began. At dusk everybody was ordered below and down they piled. Rank was lost in the shuffle. Bucks sat on majors' necks, and sergeants paid colonels no mind at all. No one could move more than three inches to either side, up or down. With this conglomerate mess of men and baggage hiding somewhere down in the inside, the ship stopped in the middle of the channel to fix a broken steam pipe. The convoying destroyer had to scamper back to see another boat over, so the disabled sister was left alone, riding at anchor, with a full moon pointing her out to any marauder who might have been swinging his periscope that way. Luck was with the crowd, though, and after a while the pipe was mended and the old boat hobbled along on its way.

The dawn of Sunday, March 10th, brought the Iowans their first glimpse of France—the harbor of Le Havre.

The unit reached a rest camp, nestled in the rock piles of outer Havre, about 10 a. m., where preparations were made to stay for several days. At 2 o'clock, the next morning, however, it was "Everybody out," and at 4 o'clock the crowd was back down in Havre climbing aboard a French passenger train, made up of "111's," which never had any intention of starting before 9 o'clock that morning, and which did not finally make up its mind to go until noon. It was a beautiful ride down through northwestern France that early spring afternoon. The valley of the Marne was reached before dark. The day closed with a wonderful sunset gilding the white crosses scattered over the fields.

That night, near the hour of twelve, some German planes were flying back to their lines from Paris, where they had brought terror and destruction and death. To the north, near the suburb of Nieully, one keen-eyed Hun spied a train standing at the entrance switch to the station yards. He gauged his distance, and threw his bomb. His companions did the same. They missed the train, but 300 yards ahead they smashed the station, killed several persons, and injured many others. The tracks were torn and twisted. Less than 200 yards to the rear of the train a great hole, fifty feet across and twenty feet deep, was torn in the earth. Windows were broken in the train, and sides of the cars splintered. On that train rode Hospital Unit R and Units G, H and B.

With that baptism of fire the occupants of the coaches were ready for almost anything, but the tracks were repaired and the train moved on early in the morning.

Another day and night across the checkered fields of France rapidly putting on their spring dress, and then a turn north toward the cedar-covered hills of the Vosges.



At noon on Wednesday, March 13, 1918, the officers and men of Hospital Unit R piled off the train at Contrexéville. They were met by the nurses, who had arrived several days previous. That afternoon the commanding officer reported, turning his organization over to Base Hospital No. 32, and from that time on the Iowans were affiliated with the Indiana unit.

The personnel of Hospital Unit R, when it reported for service with Base Hospital No. 32 at Contrexéville, France, on March 13, 1918, was as follows:

## OFFICERS.

Major James F. Clarke (commanding)...Fairfield, Iowa  
 Captain John F. Herrick.....Ottumwa, Iowa  
 Captain Henry A. Gray.....Keokuk, Iowa  
 Captain Frank M. Fuller.....Keokuk, Iowa  
 Captain Roy A. McGuire.....Brighton, Iowa  
 Captain Lora D. James.....Fairfield, Iowa  
 Captain Ben S. Walker.....Corydon, Iowa  
 First Lieutenant Kenneth L. Johnston..Oskaloosa, Iowa  
 First Lieutenant Edward J. Wehman..Burlington, Iowa  
 First Lieutenant Ira N. Crowe.....Marengo, Iowa  
 First Lieutenant Frank R. Mehler...New London, Iowa  
 First Lieutenant Robert S. Reimers...Ft. Madison, Iowa

## NURSES.

Amy Beers (chief nurse).....Fairfield, Iowa  
 Esther Albright.....Danville, Iowa  
 Madge Baldwin.....Ottumwa, Iowa  
 Philomena Bauer.....Ottumwa, Iowa  
 Grace Shirley Bell.....Mt. Sterling, Iowa  
 Dora Blank.....Keokuk, Iowa  
 Elizabeth Connelly.....Gilmore City, Iowa  
 Nelle Davies.....Ottumwa, Iowa  
 Mary L. Elder.....Ottumwa, Iowa  
 Olive K. Graber.....Burlington, Iowa  
 Sarah Greenhalgh.....Des Moines, Iowa  
 Mabel Lusk.....Ottumwa, Iowa

Margaret Henke.....Keokuk, Iowa  
 Ethel Lessenger.....Council Bluffs, Iowa  
 Agnes Swift.....Washington, Iowa  
 Elsie Thompson.....Burlington, Iowa  
 Eva Van Dyke.....Ottumwa, Iowa  
 Grace Van Evera.....Route 1, Davenport, Iowa  
 Bessie Whitaker.....Grinnell, Iowa  
 Olive Whitlock.....Route 1, Valparaiso, Ind.  
 Merle Wright.....Wright, Iowa

#### ENLISTED MEN.

Sergeant William J. McGiffin.....Fairfield, Iowa  
 Sergeant John G. Barwise.....Fairfield, Iowa  
 Corporal Clarence S. Johnston.....Ottumwa, Iowa  
 Corporal John E. Lukens.....Chariton, Iowa  
 Roy P. Anderson.....Ottumwa, Iowa  
 Wells B. Andrews.....Mt. Pleasant, Iowa  
 Robert C. Anstead.....Salt Lake City, Utah  
 Irwin W. Atwood.....Fairfield, Iowa  
 Sylvester W. Barnett.....Centerville, Iowa  
 Lowe F. Berger.....Winfield, Iowa  
 Paul J. Bishop.....Glasgow, Iowa  
 Archibald M. Cantrall.....Fairfield, Iowa  
 Merle C. Caris.....Mt. Pleasant, Iowa  
 Orion O. Coppock.....Fairfield, Iowa  
 Vincent E. Diemer.....Des Moines, Iowa  
 Claude E. Downard.....Fairfield, Iowa  
 Joseph A. Duffy.....Los Angeles, Cal.  
 Cornelius M. Edwards.....Fairfield, Iowa  
 Paul O. Ferrell.....Libertyville, Iowa  
 Harvey E. Gauner.....Fairfield, Iowa  
 Warner A. Glotfelty.....Libertyville, Iowa  
 Clifford C. Haumerson.....Ft. Atkinson, Wis.  
 Creigh C. Heminger.....Donnelson, Iowa  
 William L. Hobbs.....Ft. Madison, Iowa  
 Edmund V. Hunt.....Fairfield, Iowa  
 Brace E. Hutton.....Batavia, Iowa  
 Paul B. Jericho.....Mt. Pleasant, Iowa  
 William A. Johnson.....Birmingham, Iowa





GROUP AT THE GLASS HOUSE



OFF DETAIL

Charles S. Lamson.....	Fairfield, Iowa
Milton F. Larimore.....	Russell, Iowa
John C. Larmore.....	Hedrick, Iowa
Ellwood Lindbom.....	Fairfield, Iowa
Clarence M. McCarty.....	Ottumwa, Iowa
Bruce A. Mellis.....	Ottumwa, Iowa
Fred N. Newkirk.....	Ft. Madison, Iowa
Joe C. Norris.....	Birmingham, Iowa
Sherman H. Oatman.....	Mt. Pleasant, Iowa
Ralph C. Parrott.....	Fairfield, Iowa
Earl D. Power.....	Fairfield, Iowa
Warren K. Rogers.....	Mt. Pleasant, Iowa
Curtis G. Schillerstrom.....	Fairfield, Iowa
Calvin L. Scovel.....	Fairfield, Iowa
Harold C. Self.....	Monona, Iowa
Berl C. Shearer.....	Winfield, Iowa
Paul G. Spainhour.....	Spartansburg, N. C.
Roy L. Walgren.....	Sundance, Wyo.
Stanley S. Watts.....	Birmingham, Iowa
Afton J. Wesley.....	Wapello, Iowa
Dan L. Winter.....	Middletown, Iowa
Guy A. Woellhaf.....	Fairfield, Iowa

## VI

SPRING, 1918

EARLY in March, prior to the arrival of Unit R, Major H. H. Van Kirk, M. C., U. S. A., was assigned to Base Hospital 32 as commanding officer, and on March 6, 1918, arrived in Contrexéville and assumed command. Major Van Kirk was a regular army officer of the old school and a rigid disciplinarian. Three days after his arrival he held a memorable inspection of the unit, followed by drill in the Esplanade and a long hike with field equipment. From that time on the entire outfit was on edge. Inspections and drill became the order of the day. Both officers and enlisted men met up with a type of military discipline the existence of which they had heretofore only suspected.

With the arrival of the Unit R officers, the matter of seniority necessitated a number of changes in the staff, particularly in the medical section, where junior officers were in charge of hospital buildings. Major Herrick relieved Lieutenant Ricketts as officer in charge of Hospital C, and Captain Fuller succeeded Lieutenant Maxwell as officer in charge of Hospital E.

By this time Lieutenant Edwards, who had been unable to sail with the unit on account of illness, had rejoined it at Contrexéville. Captain Humes, however, had been transferred to Base Hospital No. 8 for temporary duty, and Lieutenant Beeler was absent on detached service at Chaumont. On March 11th Lieutenant Bushey was relieved from duty as quartermaster by Lieutenant George Schutte. Lieutenant Maxwell was appointed receiving officer, and Lieutenant Moore was succeeded as detachment commander by Captain McGuire.

As a result of promotions and the appointment of additional non-commissioned officers, there had been a number of changes of status in the enlisted personnel. The roster at this time shows the following non-commissioned officers, cooks and first-class privates: Hospital sergeant, Pfranklin; sergeants, first class, Asperger, Callis, Hitz, Jennings, Reel, Rich, Sheller and Swaim; sergeants, Ashworth, Barwise, Beck, Brewer, Carroll, Duncan, Fishback, Hollenbeck, Judd, Magee, MacDougal, McElwaine, McGiffin, McHugh, Robinson, Westfall and Dudley White; corporals, Duck, C. Johnston, Lukens, O'Hern, Reeves and George White; cooks, Ashe, Hamilton, Hicks, W. A. Johnson, Loechle, Miller, Norris, Plough, Satters and Wagner; privates, first class, Bradley, Drake, Fletcher, Gaither, Hagaman, Heffner, Hollingsworth, R. K. Johnson, Judkins, McArdle, Matthews, Quinn, Reitenour, Riggs, Sanagan, Sellmeyer, Snyder, Stuart and Stuvell.

Up until this time a few patients from the personnel and an occasional allied patient had been admitted to the hospital, but no convoys of any size, either by train or ambulance, had been received. On March 19th a trainload of patients for the Vittel Center passed through Contrexéville, and on March 22nd a telegram to the commanding officer of Base Hospital 32 brought the information that a train was en route for Contrexéville which was due to arrive the following day. On Saturday, March 23rd, at 5:00 p. m., American Hospital Train 52 arrived. It carried 336 American patients, of which all but twenty-six officers were received by Base Hospital 32. The officers, in accordance with previous arrangements, were turned over to Base Hospital 31.

The first death among the patients of Base Hospital 32 occurred the following morning, Sunday, March 24th, when Francis G. Wells, of Ohio, died. The funeral was

held in the afternoon. A brief service was read by Bishop Francis, and full military honors were accorded. At four o'clock the flag-draped coffin was lowered into the first grave in the little American cemetery that adjoined the old French graveyard on the hill back of Contrexéville.

With the arrival of the first hospital train there ensued a period of strenuous activity. Convoys of patients both by train and by ambulance were frequent. On March 26th seventy-five additional patients arrived, mostly gas cases, many of whom were in a critical condition. These patients were also Americans, but many of the subsequent convoys were composed largely of French and British troops—particularly the former. Indeed the number of French patients received by Base Hospital 32 during the spring and summer of 1918 reached such proportions that the French Service de Santé assigned two officers and a corps of clerical assistants to co-operate with the hospital staff in this work. Major Charles Fink, whose charming personality won him many friends among the Americans, was in charge of the French organization, assisted by Lieutenant Normand. The headquarters offices of Major Fink and his staff were located on the main floor of Hospital E.

Until early April the laboratory of Base Hospital 32 was located in Hospital E, with Lieutenant Scott Edwards as officer in charge, assisted by Lieutenant Elmer Funkhouser and Sergeant Don Westfall. On April 8th, however, in accordance with the recommendation of Colonel J. F. Siler, director of laboratories and infectious diseases, a central laboratory, designed to serve the needs of both Base Hospitals 31 and 32, was established on the second floor of the Harmand Hotel—Hospital 3 of Base Hospital 31. The laboratory staff was assigned as follows: Lieutenant Scott R. Edwards, officer in charge and serology; Lieutenant David Farley, wound bacteriolo-



gist; Lieutenant Elmer Funkhouser, clinical and anatomical pathology, and Lieutenant Walden E. Muns, general bacteriology. The laboratory at Hospital E was retained as an auxiliary laboratory, and small subsidiary laboratories were established in the wards. A common mortuary for both base hospitals was maintained in the basement of the Hotel Harmand Annex.

The quartermaster commissary, located on the main floor of the Hotel Continental, was also opened in April. Its shelves boasted a fluctuating supply of toilet articles, foodstuffs and tobacco. Here, if one were not too particular as to brands, cigarettes could be purchased; and at rare intervals, by standing in line for an interminable time, one might have the good fortune to come away with a one-pound tin of very good American candy. In spite of the frequent inadequacy of its supplies, the commissary filled a much-needed want. It was systematically managed, and the shortages of some items were really not so much the fault of the supply system as they were of the remarkable hoarding instinct that was so highly developed among the men. Almost everybody had a carton or two of "Camels" laid away in his barracks bag against a possible rainy day.

Changes of personnel during this period of the hospital's activity maintained their previous standards of frequency. On April 9th the first surgical team\* (A. E. F. No. 19), consisting of Major E. D. Clark, Major C. B. McCullough, Lieutenant Ralph Lochry, Lillie V. Beck, Ruth Dillon, Mary Ferguson, Clarence D. Reitenour and John McArdle, was ordered to Compiegne for temporary duty. On the same date Captain Mumford was ordered to Base Hospital 66, where he joined a surgical team from that unit, and was assigned to duty with the First French

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\*Surgical Team, A. E. F., No. 19, was mentioned in orders dated July 10, 1918, for bravery and devotion to duty under fire.

Army for a period of three months. By this time Lieutenant Beeler had returned to 32, and Lieutenant Arthur E. Guedel had been ordered to Contrexéville for duty with the hospitals at that point and at Vittel.

The second surgical team (A. E. F. No. 20) was called out on April 20th and ordered to duty with the French Third Army. This team consisted of Captain Paul F. Martin, Lieutenant Frank C. Walker, Lieutenant Kenneth L. Johnston, Hazel Bennet, Eleanor Ryan, Harry Hollenbeck and Herman Hollingsworth. It was later transferred to the French Tenth Army, and finally served with U. S. Evacuation Hospitals 6 and 7 in the St. Mihiel and Argonne sectors.

On April 20th Major Clark was relieved from duty with the first surgical team and ordered back to Contrexéville. A few days later it was rumored that there was a shortage of medical officers in the lines, and on April 26th Lieutenants Quimby, Hurt, Funkhouser, Ricketts and Crow were ordered to the front for duty with the 42nd Division. These officers were assigned to various organizations with which they served for periods ranging from six weeks to more than two months, Lieutenant Quimby with the 118th Engineers, Lieutenant Hurt with the 165th Infantry, Lieutenant Funkhouser with the 117th Ammunition Train, Lieutenant Ricketts with the 150th Field Artillery and Lieutenant Crow with the 166th Infantry.

The first enlisted man of Base Hospital 32 to become a commissioned officer was Sergeant Pfranklin, who received a commission as first lieutenant, sanitary corps, on March 25th, and was appointed adjutant, relieving Captain Graham. Later Sergeants Hitz, Reel, Callis and Duck were similarly commissioned and appointed medical supply officer, detachment commander, mess officer and registrar, respectively.

On May 2nd the American Red Cross opened the bath-

house of the Societe des Eaux—one of the most important achievements of Red Cross history in Contrexéville. The “tin pitcher” sponges which had hitherto constituted the sole method of bathing were superseded immediately by luxurious porcelain tub baths with a bountiful supply of hot water, soap and towels. The main floor of the bathhouse, with its twenty-nine bathrooms, was reserved for the enlisted men, while the twenty-eight bathrooms on the second floor were divided equally between the officers and nurses. As it was planned to receive all patients through the bathhouse except stretcher cases, whose condition was too serious to permit bathing, the baths were closed to the personnel on days when large convoys were expected. As a matter of fact the opening of the bathhouse at this time was occasioned by the arrival of a convoy of French patients for the hospital, and the work of receiving them was greatly facilitated.

The arrival of a large convoy—the receiving, bathing classification and distribution of the patients—was a task of sufficient magnitude to test the efficiency of any hospital organization. Hospital trains sometimes arrived on very short notice, and occasionally with no notice at all, but as a rule telegraphic advice of their movement was received in sufficient time to make all necessary preparations. These notification telegrams were sent to the commanding officer of the hospital from the Surgeon, Advance Section and generally stated the train number, the scheduled hour of arrival at Contrexéville, the number of sitting patients, the number of lying patients, and a classification of these patients as to nationality, surgical and medical cases, and officers and enlisted men. This statistical information, however, was often badly garbled and of little value, and, at best, was seldom more than a rough approximation of the actual contents of the train.

The expeditious handling of a large convoy was a mat-

ter of teamwork that depended upon prompt and efficient action from almost every department of the hospital. A single slip, anywhere in the system, and the entire machine ceased to function properly. As soon as notice of the movement of a train was received the adjutant's office immediately notified the officer in charge of every department concerned. The mess officer was advised as to the number of patients expected in order that additional rations might be supplied in sufficient time, and the officer in charge of each hospital building was given a rough approximation of the number of patients destined for his hospital. The preparations within the buildings were important. Sufficient beds must be made up ready for patients and the wards must be amply stocked with whatever clean linen, dressings, drugs and pharmaceutical supplies they might require. Similar, and even more extensive preparations were necessary in the surgery, where a long list of surgical equipment must be ready for instant use, and the entire surgical staff, including the X-ray department, the anesthetists and the various specialists, organized for what might prove to be an extended period of intensive service. The sergeant in charge of the garage must have his ambulances ready and waiting at the train. The medical supply officer must take an ample stock of stretchers, blankets, pajamas and splints to the station in order to reimburse the hospital train for whatever equipment might be transferred with the patients.

Since all patients except those too seriously wounded were taken from the train to the bathhouse and bathed before being sent to the buildings, it was necessary to give the American Red Cross early notification, in order that the bathhouse might be prepared and sufficient supplies of towels, soap, pajamas, bathrobes and blankets secured. The quartermaster must be at the bathhouse to direct the handling of the patients' clothing and equipment, must



FRENCH HOSPITAL TRAIN



UNLOADING PATIENTS AT THE BATH HOUSE



sort and salvage it, and sterilize the clothing. The detachment commander was required to furnish the necessary details of stretcher bearers to unload the train and to transfer the patients to and from the ambulances at the bathhouse, and from the ambulances into the various buildings. Each of these details was in charge of a non-commissioned officer. Finally, the receiving officer must be at the train ready to direct the unloading and to make a rough diagnosis of the patients and assign them by means of tags to the proper buildings, and last, but by no means least, the registrar must be prepared to record the name, number, organization, diagnosis and location of every patient.

With a few hours' advance notice for all these preparations, the work of unloading a train generally progressed smoothly and followed a definite and methodical system. Under ideal conditions there was no evidence of either haste or delay. Too much speed at the train meant a blockade at the bathhouse, the machinery would clog and the result would only incur greater delays. The work must proceed in a quiet, orderly fashion, and at a certain definite speed—fast enough to keep each department occupied to capacity, but slowly enough to avoid congestion anywhere along the line.

With the arrival of the train the officer in charge immediately reported to the receiving officer the exact number of patients sitting and lying and their location by cars. Each patient carried with him securely attached to his clothing, a field medical card showing his name, rank, organization, diagnosis and other history. This card had generally been prepared by the attending medical officer at the field hospital which received the patients originally, and was intended to accompany the man through all evacuation and base hospitals through which he might pass. Subsequent notations of operations, treatment, etc.,

were entered on the card from time to time, so that any medical organization to which the man might be sent received, attached to the patient himself, a complete history of the case.

With the information indicated on these cards, and with the assistance of the officer in charge of the train, the receiving officer was able to give priority to the most serious stretcher cases. These were removed from the train immediately, transferred carefully to the waiting ambulances, and driven, four to a car, directly to the hospital buildings to which they had been assigned. Here they were met by the officer in charge of the building and transferred, under his directions, to the wards previously prepared and waiting to receive them.

The less serious stretcher cases and the sitting cases were loaded into the ambulances, four lying or eight sitting, and sent to the bathhouse. The officer in charge here was assisted by three non-commissioned officers, one in charge of the detail that unloaded and reloaded the ambulances, and two others directing details in each wing of the bathhouse, whose duty it was to prepare the tubs and assist the patients in undressing and bathing. As soon as the patients arrived, each one was given clean pajamas, socks, a towel and a pair of slippers. The Red Cross also provided each man with a comfort bag to which they transferred their money and valuables. They were then directed to the rooms in either wing of the building, where baths were prepared and waiting for them.

Here the patients, if they arrived in uniform, parted with their clothing and equipment, all of which was piled outside the bathroom door by the orderly in charge. These piles were collected immediately and taken to a large room in the center of the building, where a quartermaster's detail sorted and bundled them prior to sterilization. In the case of American soldiers all ordnance prop-



erty was taken up and shipped to the nearest ordnance depot. Clothing was sterilized and then salvaged, along with shoes, to be put back into stock and reissued. French and Allied clothing and equipment, however, was handled differently. The patients were given checks, stubs of which were attached to their clothing, which was then sterilized and later returned to them as soon as they were able to leave the hospital. It might be said in passing that however necessary this sterilization was, it was hardly calculated to enhance the beauty of a garment. Many a beautiful, form-fitting uniform was ruined in the process, and many a French officer uttered a horrified "*Mon Dieu!*" and refused to believe his eyes when his clothing was returned to him. A freshly sterilized uniform was a sorry sight, at best. It was probably sanitary, but that was all that could be said for it.

When the patients emerged from the bathrooms in clean pajamas they were bundled into bathrobes and blankets, classified as to surgical or medical cases, and taken out to the ambulances which were waiting to transport them to the respective buildings. In the meantime the more serious cases which had been received direct from the train were already installed in the wards.

In addition to relieving the congestion at the hospital buildings, the big advantage of this method of receiving the bulk of a convoy through the bathhouse was that the patients arrived at the buildings clean and were installed immediately in fresh clean beds. The nurses and orderlies were not obliged to bathe them and could give attention immediately to more important work.

Following closely the opening of the bathhouse, another important achievement of the Red Cross was the opening of the Casino Theatre on May 4th. Mrs. Belmont Tiffany of New York, who was prominently identified with the Red Cross work in France, was present on

this occasion and was one of the principal speakers on the opening program. It was at this time, too, that the announcement was made of the transfer of Captain Lawrence Hitchcock, through whose efforts the theater had been obtained, to the Paris headquarters of the American Red Cross, and the appointment of Captain William H. Thompson as his successor.

The Casino Theatre was a thoroughly modern structure, beautifully decorated and perfect in its appointments. Under the auspices of the Red Cross it offered a diversity of attractions, and played to crowded houses. The pictures were good and the musical entertainments well planned. Officers, nurses, enlisted men and convalescent patients alike flocked to the Casino and forgot their homesickness.

With spring well along, and a few days of real baseball weather coming between rains, it was only natural that some of the more ardent fans turned their attention to getting up a team. The team was duly organized with the following lineup: Ashe, catcher; Brown and White, pitchers; Sheller, first base; Swaim, second base; Rich, shortstop; Quinn, third base; Bradley, Fishback and Corrigan, fielders. The first game was scheduled with Base Hospital 36 on May 4th, 32 losing by a score of 8 to 2. The second game, with Base Hospital 23 on May 11th, resulted in another defeat, 23 winning 9 to 5. The Base Hospital 32 team was late in organizing and was greatly handicapped in these early games by the lack of a good field for practice. It was not until mid-summer, after a monotonous series of defeats, that they finally struck their stride, and on July 13th won their first game by trouncing Base Hospital 31 to the tune of 11 to 4.

The first influenza epidemic which 32 encountered broke out on May 19th and spread rapidly through the organization. Within ten days' time almost a third of the

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LARGE SURGICAL WARD, HOSPITAL A

entire personnel had experienced a more or less severe touch of the "flu." The illness at this time was characterized by a high fever and the usual influenza symptoms, but was of surprisingly brief duration, and most of the men were back on duty within a few days. Scarlet fever also broke out in the organization late in May, but the cases were isolated immediately and the danger of contagion averted.

On May 30th the entire command of Base Hospitals 31 and 32, together with the French military and civilians, joined in the observation of Memorial Day. No better description of the Memorial Day exercises could be given than that contained in the following extract from a letter by a member of the unit:\*

I can't stop this letter without telling you about Memorial Day as we celebrated it here—and perhaps if any one who reads this has lost a soldier over here it will help a little to know in what reverence his memory is held, for I am certain the scene here was more or less typical of what took place every place in France where the American flag marks the resting place of an American soldier.

It was one of those days you could never forget, and wouldn't if you could—even in these days so full of incident and color, when so much is happening all the time that it makes one almost giddy to try and keep up with it. All these things going on so close—and though we see only a little tiny corner of it, comparatively, still it is enough to give us an idea of what it must be closer over to the big show itself. And way off here, 6,000 miles from home, Memorial Day seemed different than it ever did before—and I guess it WAS different, for all of us—I know that two years ago I spent it out at pagoda in the Speedway, keeping a weather eye on the death curve, and that last Memorial Day I was sitting in Johnny Burton's old "concrete mixer" out at Fort Harrison, watching the future officers having field day—and it's a long trail from

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\*From a letter from Mary Bostwick published in the *Indianapolis Star*.

either of these places to the little Catholic graveyard in this corner of France.

A part of this old cemetery has been set apart for the American boys who die in the hospitals here, and in this section are two graves—soldiers who died about two months ago, soon after having been brought here—and it was over the two graves that the ceremonies of the day centered.

It was the most beautiful day you ever saw—all white and blue and gold and sparkling, and many of the nurses had gone out the previous day and brought in great armloads of the wild flowers that grow everywhere here—lilies-of-the-valley and big white daisies and pink hawthorn—and the people of the town had given peonies and lilacs, so that altogether there was about a truckload of flowers.

There was a parade first, of course, forming in the Colonnade, and the crowd that watched the parade form and that lined the curb along the line of march was as much a picture as the parade itself. There were all the nurses of the two hospitals, with their white uniforms and caps and their dark blue capes lined with scarlet; there were any number of soldiers of all our allies—but with the French the most in evidence, of course, because there are so many hundreds of French patients here and most of them wear the sky blue, and there were hundreds of American soldiers, convalescing here, and from all the windows of all the hospitals bandaged heads were sticking out, and even a few patients came adventuring out in their pajamas and bathrobes so as not to miss anything. Taking it by and large, it was quite a collection.

The parade wasn't any great shakes of a parade so far as size was concerned, but I'm here to tell you that it meant more to us over here than all the gorgeous processions and pageants that ever marched through the city streets in peace time—not even excepting the famous "Germ Parades" and others I have witnessed. First came the brass band—we've got two, the jazz band and the brass band, and this was the brass band of about twenty

pieces, composed of men of both units, and then came all the available men of the hospital units—every man that could be spared from detail—all spick and span in their uniforms—even wearing their bunchy first-aid belts. There must have been about 300 medical corps men in line.

In the middle of the procession came the flag—a great big American flag—and acting as a guard of honor to it were five French soldiers, who are stationed here as interpreters and who, I think, have been in all the principal battles of the war. They wore their sky blue uniforms, with the queer, cumbersome overcoats, looped back and buttoned, and battered trench casques of blue painted steel were on their heads, and to their sides were strapped big trench knives. Every one stood at attention, very stiff and straight, as the flag went by—the French saluting in that peculiar palm-outward way they have. That was all there was to the parade—but when you come to think of it, what more was needed? The whole story was right there.

In the reviewing stand—which wasn't a stand at all, but just a place on the main promenade—were the two C. O.'s and all the other officers and some of the way-up French officers, including the "medicin chef" and the mayor—the mayor being a very stately and bewhiskered old party in a long coat with a tri-color sash across his breast.

As soon as the parade had passed every one hurried up to the cemetery and crowded in the space about the two graves of the American soldiers—and a little later the medical corps men marched up and the band and the officers. Close to the graves of the two Americans stood an American soldier holding a big French flag, and as our color bearer came up, the two stood together. I wish I could send you a picture of the whole thing. Every one who could possibly get there was there—the cemetery was packed with people—soldiers and nurses—the walls around the cemetery were lined with soldiers, French and American, and almost every citizen of this little town was

there, for to them this was all a very strange and new ceremony.

The town is in a valley, and the cemetery, at the edge of the town, is on a rise of ground, and all around on the surrounding hills were men and women working in the fields—plowing and planting, and every little while stopping to turn and look down on the cemetery where the crowd had gathered. I can't tell how beautiful the picture was. It would have to be seen—the soft and brilliant colors, the contrast of those men and women working there on their little farms, and the services being held over the graves of those two American boys.

The program was very simple. The band, standing close beside the graves, played a dirge, the bishop and the chaplain of the other unit both made addresses, and so did the medicin chef. He spoke first in English and then in French, for the benefit of the French soldiers—and the band played "My Country, 'Tis of Thee" and the "Marsellaise," and then, as six enlisted men scattered the flowers over the two graves, "Nearer, My God, to Thee." Every soldier there stood at salute as a firing squad of marines fired three volleys off toward the hills, and the echoes were still coming back as the two buglers blew "Taps." I couldn't help but wish that the families and friends of those two boys could have been here. I know that wherever I go I'll never forget that Memorial Day here in France in 1918.





BASTILLE DAY CEREMONIES



MEMORIAL DAY CEREMONIES AT THE AMERICAN CEMETERY



## VII

SUMMER, 1918

**J**UNE started off with a rush. A telegram received on May 31st told of a trainload of four hundred patients destined for Contrexéville and due to arrive that night at eleven o'clock. A later wire set the hour for three in the morning. Finally, about five o'clock, after the unit had spent a sleepless night waiting, the train arrived. It carried a mixed assortment of allied patients, British, French, Hindu and French colonial troops, and the interpreters worked overtime.

Another convoy arrived June 2nd, an ambulance train this time, carrying about fifty American patients from Baccarat. George Sandford, who had been transferred from 32 at Fort Harrison, was one of the ambulance drivers. Additional convoys were received by ambulance on the 18th, 20th and 23rd—the last arriving at two o'clock in the morning, and including twelve wounded German prisoners, who excited considerable curiosity. Souvenir hunters raided their uniforms and equipment in search of buttons and belt buckles, and a few of the linguists engaged them in conversation. They predicted at least another year of war and a conclusion without a decisive victory for either side. One of the prisoners seemed very young, apparently not over sixteen, but, except for their wounds, they were all in good shape physically, and their uniforms and equipment were of excellent quality and in good condition. They were placed in a ward by themselves in Hospital A and were kept under constant guard.

There was some excitement on the night of June 26th when a telephone call from Neufchateau announced that

German planes had just flown over the town and were headed for Contrexéville. Occasional air raids had been reported from neighboring towns—principally Chaumont and Neufchateau, but Contrexéville, on account of its size and because of the absence of any industries or troops other than medical organizations, had always been regarded as comparatively safe. The alarm was spread rapidly. Lights were extinguished, and there followed a few tense minutes of waiting, but no planes appeared. In spite of the rumors that circulated back home, this was as near as 32 ever came to being bombed.

Another trainload of patients arrived on June 29th, when one hundred and twenty-three Americans, mostly gas and liquid fire casualties from the Luneville sector, were admitted to the hospital. Busy days followed, and the number of empty beds neared the minimum.

In spite of the frequency of convoys and the long hours of work which their arrival incurred, there were occasional lulls when at least a part of the personnel found time for recreation and amusement. There was the Y concert on June 12th, and the baseball game with Base Hospital 36 a week later, which 32 lost by a score of 12 to 6.

On June 20th the enlisted men of Base Hospitals 31 and 32 presented a minstrel show at the Red Cross Theater that filled the house to standing room. The minstrels were produced under the direction of a committee which included Paul R. Matthews and Joseph Duffy, of Base Hospital 32, and Walter Onorato and Arthur Mulvihill, of Base Hospital 31. The lines and songs were clever, and the presentation was enthusiastically received. John Duncan, Bernard Bradley and Hallie Hamilton made excellent end men, and special numbers by Herman Earnest and Wilbur Baldwin were among the features of the performance. A chorus of forty voices included the following

from 32: James Sertell, Edward Reeves, Charles Stough, Leslie Summers, Harry Brown, Louis Stuart, Glenn Riggs, Harry Riddell, Marchael Lyons, Roger Giles, Samuel Hart, Earl Baker, Clarence Campbell, Paul Ferrel, John Lukens, Ferrel Searls and Vinton Diemer. Paul R. Matthews was musical director and the orchestra included Vernon Sheller, Joseph Duffy, D. K. Jones and Paul Bishop. Raymond Cooke was stage electrician.

July 4th witnessed an interesting celebration of Independence Day, a brilliant feature being the military parade in which British, French and Colonial troops joined with the Americans from both hospitals. The program was under the direction of Lieutenant Colonel C. R. Clark, of Base Hospital 31, and the celebration was centered in the park in front of the colonnade. Captain Frank Fuller, Bishop Francis, Major Charles Fink and M. Morel, mayor of Contrexéville, delivered brief addresses. The town was gaily decorated with American flags, most of which had been cleverly improvised by the natives from whatever material was at hand. The afternoon was devoted to athletics, with a double-header baseball game as a headliner. "32" came out with an even break in these games, their officers defeating the officers of 31 by a score of 12 to 2, while the enlisted men were beaten 11 to 3.

Similar, but somewhat simpler exercises, marked the observance of Bastille Day on July 14th. The town blossomed out again with flags, and the tri-color hung conspicuously from American buildings. An interesting ceremony in charge of the mayor, M. Morel, was occasioned by the decorating of two French soldiers with the Croix de Guerre.

Changes in personnel during June and July were numerous. On June 1st William P. Davis was transferred to Red Cross Military Hospital 1 at Paris for duty. On

June 15th the officers' personnel of Base Hospital 32 was augmented by the addition of Lieutenant Charles E. Wagner and Lieutenant Van N. Verplanck. Two more officers were acquired on June 26th when Captain C. W. Banner and Lieutenant Albert Barr reported for duty. It was at about this time also that the following nurses and enlisted men left for several days' duty with Evacuation Hospital 2 at Baccarat: Kathryn Graber, Florine Ostenzi, Elsie Peacock, Addie Threlkeld, Alys Weitendorf, Archibald Cantrall, Wells B. Andrews, Morris Drosdowitz, Roger Giles, Paul Jericho, Ed Kahle, John Larmore, Joseph Pugh, Clifford Williams and Lowell Young.

Other nurses ordered to Baccarat for duty during June were Tulie Roberson, Lena L. Payne, Anna Rohr, Margaret McCoppin, Beulah Prust, Ruth Wright and Mary Bowen. These nurses replaced Nellie Rock, Madge Baldwin, Dora Blank, Birda R. Hunt, Golda Smith, Amy Prosser and Mayme O'Connel who were returned to duty with "32."

On July 11th Lieutenant John T. Day was transferred to Base Hospital 101, and on July 14th Captain Eugene B. Mumford, Captain Paul Martin, Lieutenant Frank C. Walker and Lieutenant Kenneth L. Johnston, together with nurses Hazel Bennet, Eleanor Ryan, Sergeant Harry Hollenbeck and Herman Hollingsworth, all of whom had been on detached service with Surgical Team 20, were ordered back to 32 for duty. A few days later, however, when Surgical Team 20 was called to Evacuation Hospital 7, Captain Martin, Lieutenant Walker, Miss Bennett and Miss Ryan were called with it, and Captain James and Richard K. Johnson accompanied them.

On July 12th Mary Bostwick and Geraldine Frost, civilian employees, were transferred to Headquarters, S. O. S. at Tours.

The personnel was further depleted by the transfer of Lieutenant Lochry to Base Hospital 116, and by the assignment to Surgical Team 19 of Lieutenant Kenneth Johnston, Nellie Rock, Mary Mangan and Lowell Young. Lieutenant J. W. Scherer and Claude E. Snyder were transferred to the Twentieth Engineers. Lieutenant Scherer was succeeded by Lieutenant Stanley S. Reynolds, D. R. C.

One of the most important changes in the personnel during this period of the unit's history occurred on July 15th, when Major H. H. Van Kirk was relieved from duty with Base Hospital 32 and transferred to Bazoilles to assume command of Base Hospital 18. Following the transfer of Major Van Kirk, Lieutenant Colonel Edmund D. Clark, who had recently been promoted from major, became commanding officer of Base Hospital 32, and Major A. B. Graham was appointed officer in charge of Hospital A.

In addition to all of these changes in the personnel, July also saw the beginning of the formation of the Vittel-Contrexéville Hospital Center. This step was in conformity with the policy recently adopted by the chief surgeon's office of grouping all neighboring base hospitals together under a central headquarters office, and marked some important changes in the operation of the hospital. Under the new system the individual hospitals continued to function independently under their own commanding officers, but all transportation, supplies and equipment were concentrated in the central offices, and matters of local jurisdiction were under the authority of the commanding officer of the center. A complete change in paper work was necessitated, and all reports, correspondence, etc., were filed through the Hospital Center offices.

One of the first steps in the formation of the Center was the transfer of all trucks, ambulances and transportation

equipment to Vittel. This change came July 16th, much to the disgust of a large detail of men who had been digging for days through solid rock to make a place for a huge underground gasoline tank to supply the 32 garage. The tank was no sooner installed than the order came to transfer all transportation to the Center and close the garage.

The organization of the Hospital Center headquarters staff and the transfer of all quartermaster and medical supplies to the Center supply depots involved considerable labor and was not completed for several weeks. Lieutenant Colonel G. V. Rukke was relieved as commanding officer of Base Hospital 23 and assumed command of the Center with headquarters offices at Vittel. Lieutenant A. C. Calish, of Base Hospital 23, became adjutant and Major Hickey, also of Base Hospital 23, was appointed group quartermaster. Base Hospital 32 was represented on the Center headquarters staff by Major Chas. D. Humes as consulting neurologist and Lieutenant Benjamin D. Hitz as group medical supply officer. Captain Arthur E. Guedel, of Indianapolis, was consulting anesthetist for the Center.

The last days of July found the hospital experiencing a period of the most intensive service in its entire history. Convoy after convoy arrived, and officers, nurses and enlisted men alike worked at long stretches, and rested when they could. On July 22nd a trainload of five hundred and thirteen patients from the Twenty-sixth Division, northwest of Chateau Thierry, arrived, and on the following day two hundred and forty-nine more. On July 25th another convoy of more than three hundred was admitted to the hospital, making a total of considerably more than one thousand patients received within four days. Many of these came directly from field and mobile hospitals, so that Base Hospital 32 was really functioning as an evacu-



ation hospital to a large degree. The normal capacity of the hospital during July is recorded as being one thousand two hundred and twenty-five, and the emergency capacity one thousand four hundred and fifty. At one time during this busy period the patients in the hospital totaled one thousand four hundred and seventy-two. With emergency cots in the corridors and mattresses in every available corner, the patients still overflowed the buildings. On July 25th the enlisted men of the personnel, who were billeted in the "Glass House," vacated their quarters and took to "pup" tents on the hill near the old theater. For some time after that the "Glass House" was used as a surgical ward to take care of the overflow from Hospital A.

August saw fewer changes in the personnel than almost any month in foreign service. With the exception of the transfer of Nurses Jeanette Miller and Jesse M. Ervin to Base Hospital 8 on August 5th, no permanent transfers are recorded. On account of the unusually crowded conditions of the hospital, the seven-day leaves of absence, which many of the command had been enjoying, were temporarily suspended and were not resumed until the latter part of the month. The leave regulations permitted a seven-day leave of absence in any prescribed A. E. F. leave area once in every six months of service. There were a number of these leave areas, but among the most popular and those most frequently visited by the members of "32" were the areas at Nice, Aix-les-Bains, Haute Savoie, St. Malo and Grenoble. The seven days' leave did not include the time spent in going or coming from the areas, so that an absence of twelve, or even fourteen days was not uncommon. Trains were slow and connections uncertain, and the system offered unlimited opportunities for extensive travel. Short, direct routes were studiously avoided, and a circuitous itinerary was generally planned that consumed the maximum time allow-

ance, and included Paris, and numerous other points of interest.

August was another busy month, but there was never a period so busy that it was not without its occasional moments of diversion. August 8th saw a benefit musical performance in the park, attended by a little group of civilian summer visitors and a large representation of patients and personnel. On August 14th the enlisted men presented a vaudeville show which was well attended and enthusiastically received. Earnest and Lounsbury were features of the bill with clever and original numbers that scored big hits.

The baseball game on the afternoon of August 18th, in which Base Hospital 32 battled with Base Hospital 66 in an exciting twelve-inning game to a 5 to 5 tie, was one of the outstanding events of the baseball season. It was in this game that both George White and Harry Brown, two mainstays of the "32" pitching staff, broke their arms, and were out of the game for the balance of the summer.

During the latter part of August the 150th Field Artillery was stationed in and about Bulgneville, a few miles from Base Hospital 32, and visits between friends in the two organizations were frequently exchanged. A dinner dance given in honor of the officers of the 150th Field Artillery on August 24th by the officers of "32" proved to be one of the most brilliant social events of the summer. An excellent jazz orchestra composed of "32" talent furnished the music.

The Base Hospital 32 tennis tournaments were held on August 27th and 28th on the courts on the hill back of the officers' quarters. A large crowd of fans witnessed the championship finals, in which Glenn Smith defeated Roy Rich in an exciting five-set match, the last and deciding set finally going to Smith by a score of 8 to 6.

By the end of August the organization was experienc-





BALL GAME, JULY 4, 1918



THE MILL.

ing something like a lull in the hospital work. Convoys were less frequent, and the records show that only three hundred and seventy-one patients were admitted to the hospital during the entire month. These figures, however, are no indication of the condition of the hospital during the early part of August. For the most part, the wards were crowded, and the work was correspondingly heavy. The stream of convoys that had kept pouring into Contrexéville during the preceding month had necessitated the evacuation of every patient that could possibly be moved. The result was that the wards were not only crowded, but crowded with serious cases. With the gradual improvement of these cases, however, they were evacuated to base hospitals farther back of the lines, and the number of vacant beds was materially increased. Supplies were replenished and the hospital waited in readiness for the next drive.

Promotions occurring in the enlisted personnel during the summer were as follows: Ashworth, Judd, McHugh and Robinson, to sergeants, first class; O'Hern, Lukens, Riggs and George White, to sergeants; Duffy, Sanagan, Davey, Heffner, Campbell, Bubelis and Jackson, to corporals, and Barnett, Downard, Ferrell, Glotfelty, W. C. Johnson, Lamson, Marshall, Routh, Shearer, Spainhour, Sutton, Plumb, Baker, Brown, Anstead, Cooke, Coppock, Geise, Green, Griffith, Jones, Lyons, Hoffman, Mangus, Morgan, O'Reilly, Sertell, Summers, Weer, Wright and Porter to privates, first class.

## VIII

FALL, 1918

SEPTEMBER 1, 1918, the anniversary of the mobilization of Base Hospital 32, was the occasion of a large birthday celebration by the enlisted men at the Hotel de la Providence. The mess fund, under the careful supervision of Lieutenant Callis, had by this time accumulated quite a surplus, and a considerable portion of this was devoted to a big "feed" in the Providence dining room. It was a bountiful feast at which hilarity reigned supreme. Music and other entertainment added to the festivity of the occasion and made the first anniversary party was a memorable one. A similar celebration in the nurses' quarters at the Moderne was followed by a dance.

A review of the hospital's work during its first year shows that from the time of its opening in the early Spring until September 1, 1918, three thousand six hundred and ninety-five patients had been admitted, of which two thousand six hundred and eighty-two were Americans, eight hundred and eighty-four French, one hundred and seventeen British, and twelve enemy prisoners. Of the total number of patients admitted, two thousand eight hundred and ten had been returned to duty, and only eleven had died. The balance had been transferred to other hospitals or were still under treatment in "32."

August was the last month during which any French patients were admitted to the hospital. By this time the presence of American troops in the fighting lines had increased vastly in number, and it became necessary to suspend existing hospitalization arrangements with the Allies, and reserve American hospitals for American soldiers.

The Chateau-Thierry drive, which had flooded the hos-

pital beyond its emergency capacity late in July, was a sufficient warning of what might be expected in later actions. With a view to meeting a repetition of such an emergency, representatives of the chief surgeon's office visited Contrexéville early in September, and ordered the emergency capacity of the hospital increased to two thousand one hundred and fifteen beds. Two large tents were requisitioned to be erected alongside Hospital A and used as emergency surgical wards. The following table, taken from an official order issued at the time, shows the emergency expansion by buildings:

	NORMAL	EMERGENCY
Hospital A .....	479	850
Hospital B .....	202	277
Hospital C .....	125	215
Hospital D .....	190	285
Hospital E .....	229	323
Glass House .....	...	165

In order to provide adequate personnel to take care of the increased expansion, additional officers and enlisted men were assigned to "32" from time to time during September and October. Lieutenants F. H. Murray and Edward E. Johnston were transferred to "32" early in September, and on October 14th Captains J. D. Kelly, Frank R. Teschenor, H. H. Varner, and Lieutenants Arthur N. Altringer and Edmund C. Mohr were assigned to the hospital for temporary duty. Captain Alphonso H. Meyer was also transferred to "32."

The additional enlisted men attached to "32" for varying periods of service were as follows: John P. Johnson, Harold C. Miller, E. N. Freyschlag, R. M. Bierley, J. H. Corothers, Sergeant L. G. Dick, Louis Elowsky, Owen Hickey, R. H. Johnes, Aleck Kozle, E. H. Lampe, J. K. Lane, E. H. Lewis, Harry Monroe, C. J. Murphy, H. C. Parker, J. E. Pentrack, Earl Persons, Edward

Price, Paul R. Rowe, J. W. Senzell, Cad Sheets, Anthony Studis, E. F. Sweeney, J. R. Taylor, D. D. Wilson, R. R. Wittekiend, Corporal R. R. Wood, Carl Auhl, H. J. Beacht, W. L. Burris, R. V. Cavagnare, Harry Corneau, Bert Jones, Joseph Kaplan, Bruce McDonald, Lloyd Powers, Walter Rigdon, Corporal L. J. St. Marie, H. G. Swarthout, H. G. Townes, Fred Wells, and E. A. Wright.

The increase in the hospital's emergency capacity and the assignment of additional personnel were amply justified by subsequent events. Convoys arrived on September 19th, 29th, 30th, October 1st, 5th, 6th (two) and 11th. This last date found the hospital buildings again crowded to overflowing and every department occupied to capacity. On October 18th the number of occupied beds in Hospital A reached seven hundred and eighty-six—the highest number of patients accommodated in that building during its entire service.

In addition to the immense number of surgical cases in A and B, the buildings of the medical section were proportionately crowded, partly as a result of the epidemic of influenza that prevailed at that time.

The figures for September show two thousand three hundred and nineteen admissions, of which two thousand two hundred and ninety were Americans, two British and twenty-seven enemy prisoners. This was the greatest number of patients admitted to the hospital during any month of its history, although October almost equalled it with two thousand three hundred and one admissions, of which all were Americans except seventy-four enemy prisoners. Fourteen patients died in the hospital during September and fifty-seven during October.

The number of patients returned to duty during these two months was relatively small. Only nine hundred and seventy-eight completed their convalescence at Base Hos-



pital 32 and were sent back to active duty. The balance, with the exception of those whose condition was too serious to allow moving, were transferred to other hospitals.

Base Hospital 32 at this time was functioning largely as an evacuation hospital, receiving convoys directly from field hospitals, operating them if necessary, and sending them on as rapidly as possible to hospitals farther back for convalescence. As long as any emergency existed, the hospitals' instructions were to evacuate every case that could be moved, and to maintain the greatest possible number of vacant beds for subsequent convoys. As a result of this policy, one thousand four hundred and seven patients during September, and one thousand four hundred and twenty-six during October, received emergency treatment at "32" and were transferred to other hospitals for convalescence.

In spite of the additions to the personnel, the hospital force was hardly adequate during this period of emergency. The influenza epidemic was responsible for an unusual amount of sickness in the unit, and many of the command were off duty at different times during September and October on that account.

In addition to this, the gains in personnel mentioned above were offset by a number of losses. On September 26th, Major Carleton B. McCulloch (later Lieutenant-Colonel), who had been on detached service in charge of Surgical Team 19, was permanently transferred to Mobile Hospital 11, of which organization he assumed command. About two weeks later Lieutenants Maxwell, Sweet and Mehler, Nurses Mary Ferguson, Nellie Rock, and Mary Mangan, and Clarence Reitenour and Lowell Young were also transferred to Mobile Hospital 11.

Late in September, Sergeant George E. Magee, who had been confined to the hospital for some time on account of illness, was transferred to Base Hospital 8 for

return to the United States. Similar transfers during September and October resulted in the loss of the following: Estelle Miller to Base Hospital 8, Harold Poin-dexter to Base Hospital 116, and Oliver Reed to U. S. Sanitary Train 52 to Bordeaux.

On October 11th, Lieutenant Pfranklin was relieved from further duty with Base Hospital 32 and transferred to Camp Hospital 61. He was succeeded as adjutant by Lieutenant Hitz. Lieutenant C. C. Duck, recently commissioned, was assigned to duty as registrar.

Other losses in personnel occurred on October 7th, when Kenneth Fisk was transferred to the signal corps; on October 17th, when Sergeants First Class Roy Rich, Louis N. Ashworth, and Sergeants John P. Carroll and J. E. Lukens were ordered to Intermediate Medical Supply Depot 3 at Cosne for temporary duty; on October 21st, when David Dean was transferred to the Central Medical Department Laboratory at Dijon; and on October 31st, when Earl M. Gregory was transferred to the Motor Transport Corps, and Sergeant, First Class, Harry Hollenbeck was ordered to Surgical Team 20 on detached service.

The transfer of Edward C. Kahle from Base Hospital 32 deserves particular mention. During the summer Kahle, together with Vernon R. Corrigan, applied for transfer to the infantry, and on October 13th both of these men were transferred to the First Depot Division and assigned to Company A, 162nd Infantry. It was only a few weeks later that the entire unit was deeply shocked by the news of Kahle's death.

Edward C. Kahle was killed in the fighting in the Argonne Forest on November 1, 1918, and was buried in the Argonne American Cemetery at Romagne, France. The co-ordinates of his grave were given in a letter from Lieutenant Byron R. Calglazier as 4284949—X301070.

Promotions occurring during the Fall were numerous. Lieutenant Moore was promoted to captain, and Captains A. B. Graham, John P. Herrick, Chas. D. Humes and Lafayette Page were commissioned majors. Promotions in the enlisted personnel were as follows: To master hospital sergeant, Jennings; to hospital sergeant, Asperger; to sergeants, first class, Barwise, Hollenbeck, McElwayne, McGiffin, Brewer, Heffner, McDougall and Reeves; to sergeants, Drake, Baker, Campbell, Hollingsworth, Morgan, O'Reilly, Plumb, Rogers, Quinn, Duffy, Plough, Shearer and Langan (mess sergeant); to corporals, Gaither, Hemminger, Parrett, Bishop, Hobbs and Matthews; to privates, first class, Anderson, Berger, Biltimier, Bowman, Chapman, Fehr, Ferrell, Fitchett, Hunt, T. Lanahan, Larmore, Kurr, Logan, Lounsbury, McArdle, Maugham, Newkirk, Russell, Scovel, Self, Stough, Watts, Wise, Yarling, Andrews, Ashe, Atwood, Baldwin, Bartle, Blumenthal, Cantrall, Daugherty, Drosdowitz, Earnest, Edwards, Eudaly, Erdmann, Gaumer, Gilmore, Hiland, Hunsdon, Iverson, Jericho, Kroeger, C. J. Lanahan, Larimore, Lindbom, McLaughlin, Power, Riddell, Schillerstrom, M. Smith, Wells, Wesley, Woolhaf, Walgren and Brosnan.

On September 29th the American Red Cross opened the Nurses Club on the Rue Salabery. For this purpose the Villa Jeanne, a three-story villa of ten rooms, had been leased and appropriately furnished. Two large rooms on the first floor were converted into a parlor and music room, and a well-equipped kitchen served dainty luncheons and afternoon tea. The rooms on the second floor were devoted to lounging and reading rooms for the exclusive use of the nurses. One of the most popular and best-equipped rooms in the house was located on the top floor. Among other things its furnishings included a sewing machine, an electric iron and an ironing board.

Still another of the long list of Red Cross achievements occurred on October 14th, when the Red Cross Hut, one of the finest of its kind in France, was officially opened to the patients and personnel of the two hospitals. Since it had been decided to abandon the Casino Theatre on account of the difficulty of heating it during the winter months, the Red Cross Hut was designed to accommodate all future entertainments. The main hall was one hundred feet long and sixty feet wide, with a stage at one end and a sales canteen at the other. Mural decorations painted by Jay Connaway adorned the walls. Smaller rooms back of the stage were used as dressing rooms and class rooms, while at the other end of the building, back of the sales canteen, were the kitchen, storeroom and office of the directress.

One of the most noteworthy entertainments given in the Red Cross Hut came shortly after its opening, when the enlisted personnel of Base Hospitals 31 and 32 presented their second show, "An After-Mess Frolic," to a large and enthusiastic audience. The committee in charge of the production included Paul R. Matthews and Herman Earnest from Base Hospital 32. Jack Carroll was interlocutor, with Hallie Hamilton and Bernard Bradley as end men. Special numbers by Harry Riddell, Herman Earnest and Edward Reeves were enthusiastically received. Others on the program and in the chorus were C. R. Lounsbury, Harold Self, Ben Gaither, Wells Andrews, James Sertell, Harry Brown, Samuel Hart, Marchael Lyons and Luke Logan. Base Hospital 32 was represented in the orchestra by D. K. Jones, Paul Bishop, Joseph Duffy and Vernon Sheller.

The production was so cleverly conceived and so well presented that the cast finally yielded to an insistent demand for a return engagement and repeated the performance in November. Meanwhile the reputation of the pro-



HOSPITAL A. COSMOPOLITAN PALACE HOTEL



PERSONNEL HOSPITAL A



duction spread to other parts of France and there were a number of requests for out-of-town engagements. A performance was given at Langres, and other engagements would have been filled if circumstances had not prevented.

Another organization whose entertainments were immensely popular in Contrexéville and whose fame spread to other parts of the A. E. F. was the Contrexéville Jazz Orchestra, an eight-piece orchestra under the direction of Paul Matthews of Base Hospital 32. Other members were D. K. Jones, Lloyd Gleason and Joseph Duffy of Base Hospital 32 and Jesse Cantor, Maurice Robineau, Dan Griffin and Walter Onorato of Base Hospital 31. This organization played at Nancy, Toul, Bazoilles, Langres, Neufchateau and a number of other points.

On October 30th the entire command turned out to witness the presentation of the Distinguished Service Cross to one of the patients of Base Hospital 32. The ceremony took place on the Red Cross Athletic Field back of the Cosmopolitain. The decoration was awarded Lexie Downham of Jonesboro, Indiana, and was presented by Lieutenant-Colonel Edmund D. Clark, as commanding officer of the hospital. Sixty men from the personnel were in formation in three platoons.

It was on this date also that the following letter from Lieutenant-Colonel G. V. Rukke, commanding officer of the center, was posted on the headquarters' bulletin board and in all of the buildings:

HEADQUARTERS, HOSPITAL CENTER, A. P. O. 732

October 30, 1918.

General Orders No. 21

1. The commanding officer of the Hospital Center, A. P. O. 732, wishes to express his appreciation of the service rendered the Allied cause by the members of the

A. E. F. of this center during the recent emergency. The results obtained were highly gratifying, and show that the realization of a sense of duty has in this center kept pace with that of the men in the zone of advance. With the extreme shortage of personnel, inevitable during active offensive operations, and this personnel depleted through illness, over eight thousand one hundred patients were properly cared for at one time, and during a period of rapid evacuation of the sick and wounded out of this center.

2. The spirit shown is what is winning the war.
  3. This order will be published on all bulletin boards.
- By order of Lt. Col. Rukke.

A. C. CALISH,  
1st Lieut., San. Corps, U. S. A.,  
Adjutant.

The period just prior to the armistice found the hospital experiencing another welcome lull. Occasional convoys arrived, but as a result of the policy of rapid evacuation, the number of patients had been greatly reduced. The greatest possible number of vacant beds was maintained and the hospital waited in readiness for the next drive, but it never came.







MAIN SURGERY, HOSPITAL A



DRESSING ROOM, HOSPITAL A

## IX

### THE SURGICAL AND MEDICAL SECTIONS

IT IS necessary here to interrupt the chronology of events for a few chapters, and to discuss briefly some of the more important phases of the work of the surgical and medical sections, and of the various departments.

#### *The Surgical Section*

Under the original organization of the surgical service of Base Hospital 32, Lieutenant-Colonel Edmund D. Clark was appointed chief of the surgical section; Lieutenant-Colonel Carleton B. McCulloch, officer in charge of Hospital A, and Major A. B. Graham, officer in charge of Hospital B. Following the transfer of Lieutenant-Colonel McCulloch, Lieutenant-Colonel Clark also acted as officer in charge of Hospital A.

On June 15, 1918, when Lieutenant-Colonel Clark assumed command of the hospital, Major A. B. Graham succeeded him as chief of the surgical section and officer in charge of Hospital A, and Captain Joseph W. Ricketts was appointed officer in charge of Hospital B. The chief, and assistant chief surgical nurses at Hospital A were Edna June Gray and Mayme C. Clickner, respectively. Miss Clickner also served as chief surgical nurse at Hospital B. Bertha B. Mahan was head nurse at Hospital B.

Miss Charlotte Cathcart was in charge of the registration of patients for the surgical buildings and directed the office work.

Two hotel buildings constituted the surgical section. The larger hotel, Hospital A, familiarly known as the

Cosmopolitan, with a capacity of approximately 900 beds, received the *grande blessé* or seriously wounded patients. The smaller hotel, the Paris, known officially as Hospital B, with a capacity of 275 beds, received the *petite blessé* or those whose wounds were regarded as of minor significance. With everything at their command for the performance of good work, Base Hospital 32 did not fall short of the mark, and a careful review of its statistics, which is not possible in this brief summary, will prove the excellent work that this organization accomplished under the most trying and abnormal conditions.

Surgical statistics, as a general rule, are of interest only to surgeons, and even to them they may at times prove somewhat uninteresting. However, to anyone who has served with a base hospital in the advance war zone, it matters not whether officer, private, nurse, or civilian, some general statistics of the surgical work accomplished, and a short review relative to the patients cared for, should prove of some interest. Such statistics will help to recall not a few interesting incidents, and will show the gigantic work of which a well-organized base hospital is capable of performing.

The records show that Base Hospital 32 received and cared for 5,719 surgical patients. Some of these had received previous surgical care in the evacuation or field hospitals, while many were admitted who had received first-aid care only. There were a few who had received no care whatever previous to admission in the hospital.

Of these 5,719 surgical patients, there were fifty-eight deaths—a mortality rate of 1.14 per cent. Of these fifty-eight deaths, ten were moribund when they were removed from the ambulances. Nine died of pneumonia complicating their wounds. These deaths all occurred in Hospital A, the surgical hospital which cared for the *grande*

*blessé* or seriously wounded patients. This building cared for 4,482 patients. In the smaller surgical hospital which received the *petite blessé* or minor wounds, it is a remarkable incident and worthy of record that 1,257 patients were cared for without a death. In private civilian work not a few of these so-called *petite blessé* cases would have been regarded as very serious.

The rank of the 5,719 surgical patients was as follows:

Privates .....	4,623	Nurses .....	23
Non-commissioned officers	962	Civilians .....	17
Commissioned officers ...	94	Total .....	5,719

It is well to state that in the town of Contrexéville, there were no available French physicians. While the hospital commandant had no authority for so doing, no French civilian was refused surgical care. The statistics show that but seventeen civilians were admitted to the surgical hospital, but it is no exaggeration to state that several hundred French civilians received surgical attention in Base Hospital 32. It is exceedingly unfortunate that no record of these cases was kept, for if they could be added to the surgical statistics of the hospital, the number of surgical patients would exceed 6,000. It was a pleasure to care for this most appreciative class of patients who were in distress and whose only opportunity for relief was through the hospitals of the United States Army.

The surgical patients of Base Hospital 32 comprised thirty-one nationalities. They were as follows:

Americans .....	4,493	Russians .....	76
French .....	418	Belgians .....	32
British .....	266	Poles .....	19
Germans .....	*198	Arabians .....	17
Italians .....	101	Greeks .....	17

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\*Includes 189 enemy prisoners of war.

Austrians .....	13	Dutch .....	2
Canadians .....	13	Roumanians .....	2
Swedes .....	10	Mexicans .....	1
Danes .....	9	Persians .....	1
Norwegians .....	9	Australians .....	1
Algerians .....	3	Syrians .....	1
Finns .....	3	Portuguese .....	1
Moroccans .....	2	Armenians .....	1
Serbians .....	4	Chinese .....	1
Swiss .....	2	Crotes .....	1
Hungarians .....	2	Total .....	5,719

Of the 4,493 American patients, every state of the United States was represented.

A study of the ages of the surgical patients is rather interesting. The youngest patient was six, and the oldest patient was sixty-four years of age. It must be remembered that Base Hospital 32 cared for the French civilians which accounts for the extreme variation in ages. There were three American soldiers whose ages were fifteen, and there were several whose ages were beyond the half-century mark.

Forty-two per cent of the patients were between the ages of twenty-two and twenty-four. Ninety-three per cent of the patients were between the ages of nineteen and thirty-one.

The following is an accurate record of the ages of the surgical patients admitted to Base Hospital 32:

Age	Number	Age	Number	Age	Number
6 .....	2	22 .....	861	32 .....	106
7 .....	1	23 .....	851	33 .....	34
10 .....	1	24 .....	650	34 .....	40
15 .....	3	25 .....	383	35 .....	35
16 .....	2	26 .....	404	36 .....	42
17 .....	12	27 .....	311	37 .....	25
18 .....	66	28 .....	294	38 .....	17
19 .....	279	29 .....	245	39 .....	17
20 .....	297	30 .....	252	40 .....	4
21 .....	302	31 .....	141	41 .....	8



PHARMACY, HOSPITAL A



MEDICAL SUPPLY ROOM, HOSPITAL A





Age	Number	Age	Number	Age	Number
42 .....	6	47 .....	1	54 .....	1
43 .....	11	49 .....	1	60 .....	1
44 .....	6	52 .....	1	64 .....	1
45 .....	6	53 .....	1	Total ...	5,719

A review or study of the surgical conditions cared for is exceedingly interesting. In numbers it will be noted that they exceed the number of patients received by the hospital. This is explained by the fact that not a few of the patients were suffering with multiple wounds. Nowhere are the horrors of modern warfare more vividly portrayed than in a base hospital where full opportunity is afforded for the careful study and treatment of each and every patient. The following statistics of the surgical patients treated in Base Hospital 32 are not to be considered absolutely accurate, as they are the diagnoses taken from the cards of the patients upon admission to the hospital. Unfortunately it is impossible to furnish accurate statistics of the surgical conditions, diagnosed and treated, after these patients had been under observation. However, the statistics of the first diagnosis, or the diagnosis made at the field or evacuation hospital, are of sufficient interest to warrant their publication.

Gunshot wounds, and this comprises bullet, shell and grenade wounds, were responsible for the majority of our patients. The number of patients and injury are as follows:

Wounds	Number	Wounds	Number
Axilla .....	13	Buttock .....	137
Head .....	263	Back .....	238
Chest .....	165	Thigh .....	627
Shoulder .....	346	Leg .....	675
Abdomen .....	103	Foot .....	365
Arm .....	558	Face .....	215
Forearm .....	138	Neck .....	98
Hand .....	640	Knee .....	162

Wounds	Number	Wounds	Number
Elbow .....	49	Bladder .....	3
Spine .....	19	Scrotum .....	14
Ankle .....	38		

Two hundred and forty-seven patients were treated for burns resulting from gas and liquid fire.

A summary of the other surgical conditions cared for is as follows:

Trench feet .....	67	Appendicitis .....	78
Flat feet .....	78	Gall bladder .....	7
Sprains (mostly ankle)...	182	Kidney .....	1
*Nose, throat and ear....	338	Amputations .....	28
*Fractures .....	312	Rectal operations .....	90
*Teeth .....	45	Dislocations .....	23
*Eye .....	315	Infected wounds .....	117
Hernia .....	112		

### *The Medical Section*

While the average person is more apt to regard surgical work as the principal function of a war hospital the work of the medical section was, nevertheless, equally important. In considering this phase of the hospital's activity it is well to remember that in almost every war more soldiers die of disease than of wounds—and A. E. F. hospital statistics prove that this war was no exception.

The medical work at Base Hospital 32 was under the direction of Major Bernays Kennedy, who served as chief of the medical section from the time the hospital opened until after the armistice. Included on Major Kennedy's staff were Major John F. Herrick, officer in charge of Hospital C; Captain Robert M. Moore, officer in charge of Hospital D, and Captain Frank M. Fuller, officer in charge of Hospital E. Captain Leslie Maxwell also served for a time as officer in charge of Hospital E. The head nurses of the three medical section buildings were:

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\*Incomplete.





ORTHOPEDIC CASES, HOSPITAL A



A FRENCH GENERAL ON AN INSPECTION TOUR OF THE HOSPITALS

Hospital C, Eleanor C. Ryan; Hospital D, Elizabeth Backinger, and Hospital E, Helen Biggert. The office work and records of patients for the medical section were in charge of Miss Gertrude Steffen.

The medical service of Base Hospital 32 cared for a total of 4,345 patients, of whom 3,881 were members of the A. E. F. Perhaps never before has an army fighting under one flag been recruited from so many different countries. Of the 3,881 patients of the American Army, 91 per cent were American born and every state but one in the union was represented.

Major-General Bell, in a talk to officers and nurses on board the *George Washington* on our way to France, said that of the three requisites of a good soldier, the one he probably exercised the most was that of always grumbling. His words were often recalled by the conversations of convalescing soldiers who, in lieu of grumbling, indulged in heated but amusing arguments as to the relative merit and patriotism of their native states. As a court of last appeal they would inquire at the office of the medical service as to the relative number of patients the hospital had treated from the states under discussion. The champion of the state showing the smallest number of patients on a given number of pages in the Register usually closed the argument by declaring that the native sons of his particular state had sense enough to keep their heads down or were good dodgers. We can only conclude that the sons of Nevada, the only state not represented in the roster of patients treated in the medical service, were the best dodgers in the whole A. E. F.

The other 9 per cent of the patients of the A. E. F. represent thirty-five countries, and of the entire number of these patients there were only seven who could not give a birthplace.

For the benefit of those who feel that the honor and patriotism of their native state is at stake the following table is given:

MEDICAL SERVICE—BASE HOSPITAL 32

*A. E. F. Patients*

Alabama .....	106	Texas .....	65
Arkansas .....	2	Utah .....	14
Arizona .....	36	Vermont .....	12
California .....	41	Virginia .....	102
Colorado .....	11	Washington .....	15
Connecticut .....	36	West Virginia .....	56
Delaware .....	1	Wisconsin .....	114
District of Columbia	7	Wyoming .....	5
Florida .....	28		—
Georgia .....	89	Total number born	
Idaho .....	2	in United States	3,533
Illinois .....	180		
Indiana .....	272	Albania .....	1
Iowa .....	155	Argentine Republic.	1
Kansas .....	60	Armenia .....	1
Kentucky .....	89	Austria .....	6
Louisiana .....	24	Belgium .....	4
Maine .....	25	Bermuda .....	3
Maryland .....	75	Bohemia .....	2
Massachusetts .....	119	British West Indies.	1
Michigan .....	69	Canada .....	19
Minnesota .....	108	Cuba .....	1
Mississippi .....	34	Denmark .....	5
Missouri .....	138	England .....	15
Montana .....	12	Finland .....	4
Nebraska .....	22	France .....	1
Nevada .....	..	Germany .....	2
New Hampshire ...	26	Greece .....	6
New Jersey .....	82	Hawaii .....	3
New Mexico .....	3	Holland .....	3
New York .....	409	Hungary .....	3
North Carolina ....	60	Italy .....	118
North Dakota .....	13	Ireland .....	32
Ohio .....	215	Mexico .....	1
Oklahoma .....	17	Montenegro .....	2
Oregon .....	14	Moravia .....	1
Pennsylvania .....	379	Newfoundland ....	2
Rhode Island .....	14	Norway .....	7
South Carolina ....	78	Poland .....	14
South Dakota .....	23	Porto Rico .....	2
Tennessee .....	76	Portugal .....	2

Russia .....	57	British patients ....	12
Scotland .....	11	French patients—	
Sweden .....	8	Algeria .....	1
Switzerland .....	1	Arabia .....	1
Tunis .....	1	French .....	435
Wales .....	1	Indo China .....	4
	—	India .....	1
Total number for-		Italy .....	3
eign born .....	341	Senegal .....	7
No information of			—
birthplace .....	7		452
	—		—
Total number pa-		Total number pa-	
tients, A. E. F.	3,881	tients .....	4,345

Unfortunately the nativity of patients of the French army was not given in a good many cases, as this was not required on the French card of admission, so a general heading of France as a birthplace was given to those French patients. However, at one time in Hospital E, the Providence, where most of the French patients were cared for, eleven different nationalities occupied one ward, most of them being soldiers of the colonial and territorial troops.

In making the following classification of patients cared for by the medical service, the eighteen subdivisions of the sick and wounded report for the A. E. F., which were followed by Base Hospital 32, have been used. The classification is particularly difficult for the reason that many diagnoses were changed two, three, or more times, as the progress of the disease advanced or as complications developed of more severity than the original cause of admission. Practically every disease enumerated in the sick and wounded report was encountered, and quite a few which the report overlooked.

#### I—INFECTIOUS AND EPIDEMIC DISEASES

Diphtheria .....	6	
+emphysema, ch.; pulmonary.....	1	
+gas .....	1—	8

Diphtheria carrier .....	2—	2
Dysentery .....	18	
+D. A. H.....	1	
bacillary .....	1	
entamoebic .....	2	
entamoebic (secondary to iliocolitis).....	1	
Flexner type .....	1—	24
suspect .....	4—	4
Influenza .....	1,020	
+acne vulgaris .....	1	
+amputation, right foot (perforating wound) .....	1	
+angioneurosis; +oedema, right hand and arm .....	1	
+appendicitis, acute .....	1	
+arthritis, acute, rheumatic.....	1	
+bronchitis, acute .....	3	
+diarrhoea .....	2	
+dysentery .....	1	
+enteritis, acute .....	2	
+enterocolitis, acute .....	1	
+flat foot .....	1	
+flat foot, +pyoderma (abscess, neck)..	1	
+gas .....	1	
+gas, +flat foot.....	1	
+gonorrhoeal ophthalmia .....	1	
+G. S. W.....	9	
+hernia; femoral, left.....	1	
+hernia; inguinal, bilateral.....	1	
+laryngitis .....	1	
+mastoiditis, acute, left.....	1	
+mitral deficiency .....	2	
+mitral stenosis .....	1	
+mumps, bilateral, +orchitis, left.....	1	
+nephritis, acute .....	1	
+orchitis, chronic .....	1	
+otitis media, acute, suppurative, left....	1	
+otitis media, chronic, catarrhal, bilateral.	2	
+otitis media, chronic, catarrhal, right....	1	
+otitis media, chronic, suppurative, bilateral .....	1	
+perirectal abscess .....	1	
+pes cavus .....	1	
+pleurisy, acute, fibrinous.....	1	
+psoriasis .....	1	
+pyoderma .....	1	
+pyorrhoea .....	1	
+retinitis, left .....	1	





PERSONNEL HOSPITAL E



HOSPITAL E. HOTEL DE LA PROVIDENCE



Influenza—		
+rheumatic fever .....	1	
+scabies .....	6	
+sciatica, left .....	1	
+syphilis, tertiary .....	1	
+tonsillitis, acute, left.....	2	
+tonsillitis, chronic, hypertrophic.....	1	
(observation for tuberculosis).....	6—1,088	
Malaria .....	13	
(following influenza) .....	2—	15
Measles .....	1—	1
Meningitis, meningococcus .....	3—	3
Mumps, bilateral .....	21	
+bronchitis, acute .....	2	
+gas .....	1	
+influenza .....	1	
+orchitis, bilateral .....	1	
+orchitis, unilateral .....	6	
+rheumatism, muscular .....	1	
Mumps, unilateral .....	9	
+orchitis, unilateral .....	1—	43
Paratyphoid fever, Type A.....	1—	1
Poliomyelitis, acute, anterior.....	1—	1
Purulent infection; septicaemia, hand, left.....	1—	1
Rheumatic fever, acute.....	14	
+inflammation, knee, right.....	1—	15
Scarlet fever .....	6	
(following influenza) .....	2	
+G. S. W., leg, left.....	1	
+nephritis .....	1	
+nephritis, post-scarlatinal .....	2	
+nephritis, +D. A. H., post-scarlatinal...	1—	13
Trench fever .....	4	
+gastritis, acute .....	1—	5
Typhoid fever .....	9	
(following influenza) .....	5	
+myostosis .....	1	
+urethritis, acute, gonorrhoeal (old).....	1—	16
Vincent's Angina .....	1—	1—1,241

## II—TUBERCULOSIS

Larynx, tuberculosis of, chronic.....	1—	1
Pulmonary tuberculosis .....	6	
+diabetes mellitis .....	1	
+empyema (drained) .....	1	
acute .....	2	
acute, miliary .....	1	

## Pulmonary tuberculosis—

chronic .....	4		
chronic, insipient .....	3		
chronic, moderately advanced.....	2		
suspects (observation) .....	6—	26—	27

## III—VENEREAL DISEASES

Gonococcus infection .....	3		
orchitis, +gas, yperite, contact.....	1		
urethritis, acute .....	1		
urethritis, acute, +arthritis.....	1		
urethritis, acute, +gas.....	1—	7	
Syphilis .....	5		
myositis .....	1		
neuritis, sciatica, left.....	1		
+tonsillitis, acute, catarrhal, bilateral....	1		
secondary .....	3		
tertiary .....	1		
tertiary, cerebrovascular .....	1		
tertiary, cerebrospinal .....	1		
tertiary, cerebral .....	1—	15—	22

## IV—GENERAL DISEASES

Alcoholism, acute .....	1—	1	
Anemia .....	1		
pernicious .....	1—	2	
Arthritis .....	19		
hand, right .....	1		
hip, right .....	1		
hip and leg, right.....	1		
knee, right .....	2		
legs, bilateral .....	5		
sacro-iliac joint .....	1		
+diarrhea .....	1		
+dental treatment .....	1		
+flat foot .....	1		
+old operative pain.....	1		
+pyrrhoea .....	1		
acute .....	7		
acute, ankle, left .....	1		
acute, ankle, right .....	1		
acute, hip, left .....	1		
acute, hip, left, +syphilis.....	1		
acute, hip, left, +varicose veins.....	1		
acute, knecs, bilateral .....	2		
acute, knee, right .....	3		
acute, migratory .....	1		

Arthritis—		
acute, multiple .....	18	
acute, multiple, infectious .....	1	
acute, multiple, +bronchitis, acute.....	1	
acute, muscular .....	4	
acute, +hypertrophied tonsils .....	2	
acute, articular .....	14	
acute, articular, elbow, right.....	2	
acute, articular, multiple .....	12	
acute, articular, +tonsillitis, acute, follicular	4	
chronic, .....	4	
chronic, ankle, left .....	1	
chronic, diffused .....	1	
chronic, foot, left, +complete deafness, left	1	
chronic, hip, left .....	2	
chronic, hip, right .....	1	
chronic, hip, left, +urinary incontinence...	1	
chronic, knee, bilateral.....	1	
chronic, knee, left .....	1	
chronic, multiple .....	12	
chronic, multiple (myocitis) .....	1	
chronic, multiple, +scabies .....	1	
chronic, muscular .....	5	
subacute, articular .....	2	
subacute, iliosacral, bilateral.....	1	
subacute, multiple .....	1—	147
Diabetes mellitus (following influenza).....	1	
+arthritis, ac., shoulder, left.....	1—	2
Drug habit, cocaine poisoning.....	1—	1
Goiter .....	1	
+psychoneurosis .....	1	
hyperthyroidism, severe .....	1—	3
Purpura hemorrhagica .....	1—	1
Toxic results of preventive therapy—		
Reaction to novarsenobenzol.....	1	
Serum sickness .....	1—	2— 159

## V—NERVOUS DISEASES

Chorea .....	1—	1
Epilepsy .....	6	
(observation for) .....	1—	7
Migraine .....	3—	3
Neuralgia, cranial .....	1	
intercostal .....	4	
ovarian .....	1	
sciatic .....	14	
sciatic, +lumbar contracture.....	1	
sciatic, +tonsillitis, chronic.....	1	

Neuralgia, cranial—			
supraorbital .....	2—	24	
Neuritis .....	1		
arm, right .....	1		
suspected cervical plexus.....	1		
sciatic .....	2—	5	
Palsey, arm, left (cause N. Y. D.).....	1		
face (cause N. Y. D.).....	2—	3	
Paralysis, arm, left, traumatic.....	1		
arm, right, functional.....	1		
facial .....	2		
paraplegia, ataxia .....	1—	5	
Tabes dorsalis .....	2—	2—	50

## VI—MENTAL DISEASES AND DEFECTS

Constitutional psychopathic state.....	1—	1	
Defective Mental Development.....	6—	6	
Dementia precox .....	1—	1	
Mental deficiency .....	7		
+scabies .....	1		
Mental and physical deficiency.....	3—	11	
Mental observation .....	17—	17	
Psychoneurosis, Type N. Y. D.....	64		
hysteria .....	11		
neurasthenia .....	14		
psychasthenia (syphilitic) .....	1		
traumatic .....	1		
war .....	1—	92	
Psychosis, Type N. Y. D.....	2		
alcoholic .....	6		
hysterical .....	2		
toxic (influenza) .....	1		
manic depressive; dementia.....	2—	13	
Neuropsychosis .....	1—	1	
Neurosis, Type N. Y. D.....	3		
anxiety .....	4		
cardiac .....	1		
depressive .....	1		
hysteria .....	1		
war .....	2—	12—	154

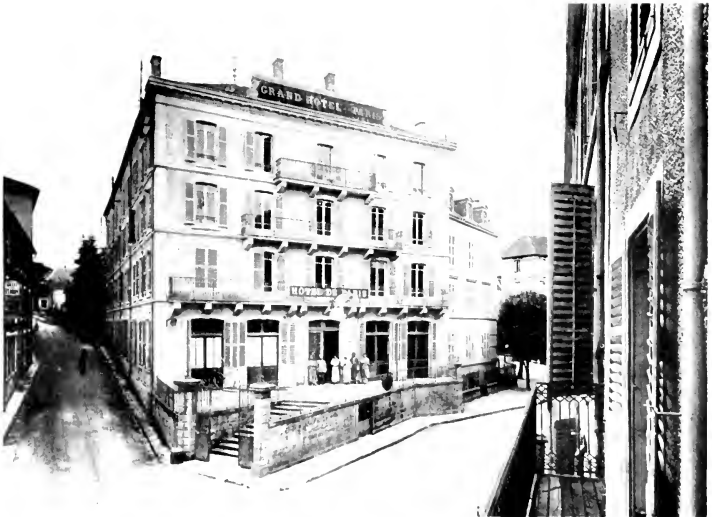
## VII—DISEASES OF THE EYE

Conjunctivitis .....	4		
+hemoptysis .....	1		
+herpes, +flat foot.....	1—	6	
Defective vision .....	3—	3—	9





PERSONNEL HOSPITAL B



HOSPITAL B, HOTEL DE PARIS



## VIII—DISEASES OF THE EAR

Otitis, externa, celumen, right.....	1—	1	
media, acute, left.....	1		
media, acute, bilateral.....	2		
media, acute, bilateral, +bronchitis, acute..	1		
media, chronic, suppurative, right.....	1		
media, chronic (Bezold's abscess), right...	1—	6	
Deafness .....	1—	1—	8

## IX—DISEASES OF THE NOSE

Deviation of nasal septum.....	1—	1	
Epistaxis .....	1—	1	
Sinusitis, frontal, chronic.....	2—	2—	4

## X—DISEASES OF THE THROAT

Abscess, peritonsillar, right.....	1—	1	
Hypertrophied tonsils .....	1—	1	
Laryngitis, acute .....	6		
acute (observation for tuberculosis).....	1		
acute, catarrhal .....	1		
chronic .....	3—	11	
Pharyngitis, acute .....	2		
chronic .....	1—	3	
Tonsillitis, acute .....	13		
acute, catarrhal .....	19		
acute, catarrhal, +ankylestomasis.....	1		
acute, catarrhal, +bronchitis, acute, ca-			
tarrhal .....	2		
acute, catarrhal, +mumps.....	1		
acute, follicular .....	26		
acute, follicular, +exhaustion.....	1		
follicular, +lymphadenitis, cervical, ch., rt.	1—	64	
chronic, hypertrophic, +laryngitis, +bron-			
chitis .....	1—	1—	81

## XI—CIRCULATORY SYSTEM

## Diseases of the Heart—

Angina pectoris .....	2		
+bronchitis .....	1—	3	
Asthma, cardiac, chronic.....	1—	1	
Cardiac dilatation (following trench fever)	1—	1	
Disordered heart action.....	4		
(following bronchitis) .....	1		
Tachycardia .....	8		
paroxysmal .....	1		

Diseases of the Heart, Disordered heart action—			
Arhythmia .....	1		
(following influenza) .....	1		
respiratory, paroxysmal .....	1		
toxic, paroxysmal .....	1—	18	
Endocarditis, acute .....	1		
acute (following influenza).....	1		
acute, mitral and aortic.....	1		
acute, +rheumatism, acute.....	1		
chronic .....	1—	5	
Myocarditis, acute .....	2		
chronic .....	2		
chronic (following bronchitis).....	1		
chronic (following influenza).....	1		
chronic (observation for exophthalmic goiter) .....	1—	7	
Valvular heart disease.....	2		
Aortic insufficiency .....	2		
Mitral insufficiency .....	5		
Mitral murmur, +pleuro-pulmonary congestion .....	1		
stenosis, +rheumatic fever, acute....	1—	11	
Diseases of the Blood Vessels—			
Hemorrhoids .....	4		
internal and external, +anal fissure...	1—	5	
Phlebitis, non-phlegmonous .....	1—	1	
Varicose veins (following influenza).....	1—	1	
Varicocele, left .....	2—	2	
Diseases of the Lymphatic System—			
lymphadenitis, acute .....	2		
chronic .....	1		
cervical .....	2		
cervical, +bronchitis, +diarrhoea....	1		
cervical, +gas, inhalation.....	1		
+gastritis .....	1		
inguinal .....	1		
submaxillary, chronic .....	1		
suppurative .....	1		
tubercular, non-suppurative .....	1—	12—	67

## XII—DISEASES OF RESPIRATORY SYSTEM

Asthma .....	4—	4
Bronchitis, acute .....	177	
acute, +angina .....	1	
acute, +congestion of lungs (following gas)	1	
acute, +diarrhoea .....	1	
acute, +enteritis, acute, catarrhal.....	2	

Bronchitis—		
acute, +epistaxis .....	1	
acute, +flat foot .....	1	
acute, +gas .....	1	
acute, +G. S. W.....	1	
acute, +hyperacidity .....	1	
acute, +keratitis, acute .....	1	
acute, +laryngitis, acute .....	1	
acute, +laryngitis, subacute, catarrhal....	1	
acute, +mitral insufficiency (following gas)	1	
acute, +otitis media, chronic, catarrhal, bi-		
lateral .....	1	
acute, +pediculosis corporis .....	1	
acute, +pleurisy, acute, fibrinous.....	1	
acute, +pleurisy, with effusion; right....	1	
acute, +urethritis, acute, gonorrhoeal....	1	
acute, catarrhal .....	29	
acute, catarrhal, +myocarditis, chronic (fol-		
lowing influenza) .....	1	
acute, purulent, bilateral .....	1	
chronic .....	32	
chronic, +D. A. H.....	2	
chronic, +emphysema .....	4	
chronic, +hemoptysis .....	1	
chronic, +scabies .....	1	
chronic, (observation for pulmonary tuber-		
culosis) .....	10	
chronic, catarrhal .....	2—	279
Bronchiectasis .....	1—	1
Broncho-pneumonia .....	66	
(following influenza) .....	67	
(following influenza), +D. A. H.....	1	
(following influenza), +empyema .....	2	
(following influenza), +G. S. W.....	2	
(following influenza), +hernia, inguinal, bi-		
lateral .....	1	
(following influenza), +mastoiditis .....	1	
(following influenza), +meningitis (pneu-		
mococcus) .....	1	
(following gas) .....	4	
(following gas), +G. S. W.....	1	
+arthritis .....	2	
+diarrhoea .....	1	
+G. S. W.....	2	
+hemorrhoids, +epididymitis; right.....	1	
+mumps .....	1	
+nephritis, acute (following exposure)...	1	
+peritoneal abscess .....	1	

Broncho-pneumonia—		
+pleurisy, acute; right.....	1	
+pleurisy, serofibrinous .....	1	
+pleurisy, serofibrinous (with effusion)...	1	
+pneumothorax, +empyema .....	1	
+purpura hemorrhagica .....	1	
+typhoid fever .....	1	
Type II, +gas.....	1—	162
Pneumonia, lobar .....	34	
(following influenza) .....	6	
(following influenza) +empyema.....	2	
+empyema .....	2	
+empyema, +pneumothorax, left.....	1	
(with effusion) .....	1—	46
Pleurisy, empyema (following influenza).....	1—	1
Pleurisy .....	27	
(with effusion) .....	3	
acute, plastic (following influenza)...	2	
serofibrinous .....	12—	44
Pleuritic adhesions .....	2	
+constipation .....	1	
+diarrhoea .....	1—	4
Thickened pleura .....	1—	1
		<hr/> 50— 542

## XIII—DIGESTIVE

Diseases of Mouth—		
Abscess, alveolar .....	1—	1
Dental treatment .....	2—	2
		<hr/> 3
Diseases of Stomach—		
Gastritis, acute .....	37	
acute, +infected feet .....	1	
acute, +otitis media, chronic.....	2	
acute, +neuralgia, occipital .....	1	
acute, catarrhal .....	7	
acute, catarrhal (due to pyorrhoea)...	1	
acute, catarrhal (due to pyorrhoea alveolaris and Vincent's angina)...	1	
chronic .....	3	
chronic, +dyspepsia .....	1—	54
Gastroenteritis, acute .....	51	
acute, +G. S. W.....	4	
acute, +mumps .....	1	
acute, +renal colic .....	1	

## Diseases of Stomach, Gastroenteritis—

acute, catarrhal .....	6	
acute, catarrhal, +flat foot .....	1	
acute, catarrhal, +tonsillitis, acute ....	1	
acute, dietetic .....	1	
acute, dietetic, +lymphadenitis, axillary, right .....	1	
chronic .....	2	
chronic, catarrhal .....	2—	71
Gastralgia .....	1—	1
Gastric Ulcer .....	1—	1

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## Diseases of the Intestines—

Appendicitis, acute .....	3	
acute (following influenza) .....	1	
chronic .....	3	
chronic, +cholecystitis, ch., catarrhal..	1	
post-operative .....	1—	9
Colitis, acute .....	5	
chronic .....	2—	7
Constipation .....	1—	1
Diarrhoea, +scabies .....	2	
acute .....	40	
acute, +cephalgia .....	1	
chronic .....	1	
fermentative .....	3—	47
Enteritis, acute .....	48	
acute, +adenitis, inguinal, bilateral....	1	
acute, +arthritis, multiple .....	3	
acute, +bronchitis .....	2	
acute, +concussion, shell .....	1	
acute, +gonorrhoea .....	1	
acute, catarrhal .....	24	
acute, catarrhal, +intermittent scabies.	1	
acute, dietetic .....	3	
chronic .....	4—	88
Enterocolitis, acute .....	60	
acute, +appendicitis, chronic .....	1	
acute, +exhaustion .....	1	
acute, +gastritis, acute .....	1	
acute, +G. S. W. ....	1	
acute, +hemorrhoids .....	2	
acute, +lumbago .....	1	
acute, +psoriasis (cause N. Y. D.)...	1	
acute, +sprain of knee .....	1	
acute, catarrhal .....	8	

## Diseases of the Intestines, Enterocolitis—

acute, dietetic .....	5	
subacute .....	3—	85
Hernia .....	2	
inguinal, right .....	2—	4
Iliocolitis, acute .....	1	
acute, +arthritis, acute, multiple.....	1	
acute, dietetic .....	1	
acute, dietetic, +influenza .....	1	
chronic .....	1—	5
Intestinal adhesions .....	1	
+autointoxication .....	1—	2
Intestinal Parasites—		
Ankylostomiasis .....	1	
Tapeworm, saginita .....	1	
Hookworm .....	2—	4
Intestinal Stasis .....	1—	1
Ulcer of duodenum.....	1—	1

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## Diseases of the Liver and Gall Bladder—

Cholecystitis, acute .....	7	
acute, +jaundice .....	9	
acute, catarrhal .....	2—	18
Cirrhosis of liver, hypertrophic (following influenza) .....	1—	1
Congestion of liver, +cardio-renal sclerosis	1—	1
Functional derangement of liver.....	1—	1

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## Diseases of Spleen—

Splenic anemia (Bante's disease).....	1—	1
Peritoneal abscess .....	1—	1— 407

## XIV—GENITO-URINARY (NON-VENEREAL)

## Diseases of the Kidneys and Annexa—

Hematuria .....	2	
+renal stone .....	1—	3
Nephritis, albuminuria .....	3	
albuminuria, +ecthyma, leg, right....	1	
acute, .....	4	
acute (following exposure).....	1	
chronic .....	1	
chronic, +gastritis, acute, catarrhal +pyrrhoca alveolaris) .....	1	
glucosuria .....	1	
uremia .....	1—	13

## Diseases of the Kidneys and Annexa—

Pyelitis, acute .....	1—	1
Polycystic degeneration of kidneys.....	1—	1
		<hr/>
		18

## Diseases of the Bladder—

Cystitis, acute .....	1	
hemorrhagic .....	1—	2
Urinary incontinence .....	4—	4

## Diseases of the Urethra—

Stricture .....	2—	2
Urethritis .....	1—	1
		<hr/>
		3

## Diseases of the Prostate—

Prostatitis .....	1—	1
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## Non-Venereal Diseases of the Genital Organs—

Epididymitis, acute .....	1—	1
Orchitis, acute, bilateral .....	3	
acute, left, +atrophy of testicle, left..	1	
chronic, right .....	1	
traumatic (kicked by horse).....	1—	6
		<hr/>
	7—	35

## XV—DISEASES OF SKIN

Acne, severe, back and chest.....	1—	1
vulgaris .....	1—	1
Dermatitis (cause N. Y. D.).....	2	
paputo-macular, acute .....	1	
traumatic .....	3—	6
Eczema .....	10	
+pomphlox, chronic .....	1—	11
Dermo-epidermitis .....	1—	1
Folliculitis .....	2—	2
Intertriga .....	2—	2
Gangrene; Raynaud's disease.....	1—	1
Herpes zoster .....	1—	1
Psoriasis .....	8—	8
Pyodermia .....	7	
abscess, dental .....	1	
abscess, foot, left.....	2	
abscess, neck .....	1	
abscess, scapula, right .....	1	
abscess, shoulder, left.....	1	

Pyodermia—		
blisters, heels .....	1	
cellulitis .....	1	
cellulitis, infective, legs, bilateral.....	1	
ecthyma .....	1	
furunculosis, multiple, +eczema.....	1	
furunculosis, +adenitis, +cellulitis, neck..	1	
impetigo .....	8	
impetigo, contagiosa .....	2	
impetigo, +furunculosis .....	1	
ulcers, heels, +cellulitis, legs.....	1	
ulcers, heels, +rheumatism, chronic.....	1—	32
Scabies .....	38	
+gastritis .....	1	
+G. S. W.....	1	
+internal hemorrhoids .....	1	
+mumps .....	1—	42
Seborrhoea .....	1	
impetigo .....	3—	4
Urticaria, acute, +G. S. W.....	1—	2
acute, +nephritis, acute.....	1—	2
Skin eruption (cause N. Y. D.).....	1—	1— 115

## XVI—BONES AND ORGANS OF LOCOMOTION

Diseases of the Bones—		
Periostitis, foot, left.....	1—	1
Diseases of the Joints—		
Arthritis (see General Diseases).		
Synovitis, acute, knee, left.....	3	
chronic, knee, right.....	1	
subacute, knee, left.....	1	
subacute, knee, bilateral.....	1	
traumatic .....	1—	7
Miscellaneous Diseases of Organs of Locomotion—		
Flat foot .....	10—	10
Lumbago, acute .....	18	
chronic .....	1—	19
Metatarsalgia .....	1—	1
Myositis .....	1—	1
Sore feet .....	1—	1
Tenosynovitis .....	1—	1
Trench foot (open blisters).....	1—	1
Abrasion, feet .....	5—	5
Wound, infected, suppurating, foot.....	2—	2
		—
		41— 49





PERSONNEL HOSPITAL D



HOSPITAL D, ROYAL HOTEL



## XVII—MALFORMATIONS, ILL-DEFINED DISEASES

## Acquired Malformations—

Adhesions, post-operative .....	1—	1
Cicatrix, traumatic, axilla, left.....	1—	1
Contusions, back, shell explosion.....	5	
multiple, shell explosion.....	1	
scrotum; kick of horse.....	1—	7
Difficulty in walking, old trauma.....	1—	1
Shock, traumatic (injury to back).....	1—	1
Spinal curvature, +arthritis.....	1—	1
Strain, muscular, back (due to lifting)....	1	
Strain, muscular, side, right (due to lifting)	1—	2
		<hr/>
		14

## Diseases Not Specified or Ill-Defined—

Cyst, cheek, left.....	1—	1
Eneuresis, traumatic .....	1—	1
Myalgia, acute .....	3	
acute, +bronchitis, acute.....	1	
acute, diffused .....	1	
acute, intercostal, right, (old G. S. W.)	1	
acute, interscapular .....	1	
acute, lumbar .....	2	
acute, multiple .....	7	
chronic, back .....	1—	17
Myasthenia .....	1—	1
Myolitis, traumatic .....	1—	1
Myostosis, acute .....	1	
acute, legs, +arthritis, multiple (fol-		
lowing influenza) .....	1	
acute, multiple .....	1	
acute, spinal .....	1—	4
Pain, multiple .....	1	
muscular .....	4—	5
Scoliosis, lateral, left.....	1—	1
		<hr/>
		31

## No Disease, Feigned Disease—

F. U. O.....	33	
General physical debility.....	3	
Malingering .....	1	
No disease found.....	1	
N. Y. D. (undiagnosed).....	42	
Observation .....	2	
Reclassification .....	4	
Transfer to surgical service.....	9—	95— 140

## XVIII—EXTERNAL CAUSES

Concussion .....	8	
+gas .....	2	
accidental, from fall.....	2	
by explosion .....	17	
shell .....	43	
shell, +exhaustion .....	2	
shell, +gas .....	4	
shell, +gonorrhoea, chronic.....	1	
shell, +scabies .....	2	
recurrent .....	1—	82
Dislocation, wrist, lifting.....	1—	1
Effect of heat and cold—		
Sunstroke .....	1	
Blistered feet, from sun.....	1—	2
Exhaustion .....	31	
+hysteria .....	1	
+pyodermitis, legs .....	1	
blistered feet .....	1	
contusions .....	1	
dental condition .....	1	
diarrhoea .....	3	
exposure .....	7	
gas, mustard .....	1	
G. S. W.....	1	
nervous .....	12	
overexertion .....	16	
overexertion, +gas, arsene.....	3	
overexertion, exposure and immaturity (15 years) .....	1	
(observation for pulmonary tuberculosis)..	1—	81
Gas, N. Y. D.....	273	
N. Y. D., +concussion, shell .....	3	
N. Y. D., +endocarditis, chronic .....	1	
N. Y. D., +fissure, anus .....	1	
N. Y. D., +foreign body, hand, right.....	1	
N. Y. D., +gastritis, acute .....	1	
N. Y. D., +goiter, simple .....	1	
N. Y. D., +G. S. W.....	2	
N. Y. D., +hemorrhoids, internal .....	1	
N. Y. D., +hernia, inguinal, left.....	1	
N. Y. D., +malaria .....	1	
N. Y. D., +sprain, ankle, right.....	1	
N. Y. D., +trachoma .....	1	
N. Y. D., +varicocele .....	1	
N. Y. D., contact .....	31	
N. Y. D., contact, +abscess under arm.....	1	

## Gas, N. Y. D.—

N. Y. D., contact, +ethmoiditis, +inflammation, antrum, right.....	1
N. Y. D., contact, +trench feet.....	1
N. Y. D., inhalation .....	150
N. Y. D., inhalation, +enteritis .....	1
N. Y. D., inhalation, +exhaustion .....	1
N. Y. D., inhalation, +G. S. W.....	2
N. Y. D., inhalation, +influenza .....	1
N. Y. D., inhalation, +talipes valgus .....	1
N. Y. D., contact and inhalation.....	56
N. Y. D., contact and inhalation, +asthma.	1
arsene .....	8
arsene, +exhaustion, overexertion .....	1
arsene, inhalation .....	3
arsene, inhalation, +influenza .....	1
arsene, contact and inhalation.....	1
chlorine .....	1
chlorine, accidental .....	2
chlorine, inhalation .....	3
Chloro-picrine .....	6
lachrymose .....	1
mixed .....	1
mixed, contact .....	7
mixed, inhalation .....	7
mixed, contact and inhalation.....	19
mixed, contact and inhalation, +exhaustion	1
mixed, contact and inhalation, +influenza..	1
mixed, contact and inhalation, +neuropsychosis .....	1
mixed, contact and inhalation, +psychoneurosis .....	1
mustard .....	108
mustard, +exhaustion .....	1
mustard, +G. S. W.....	2
mustard, +pterygium .....	1
mustard, contact .....	65
mustard, inhalation .....	50
mustard, inhalation, +psychoneurosis .....	1
mustard, contact and inhalation.....	129
mustard, contact and inhalation, +flat foot	1
mustard, contact and inhalation, +hemorrhoids .....	1
phosgene .....	24
phosgene, +G. S. W.....	1
phosgene, inhalation .....	31
phosgene, inhalation, +influenza .....	1
phosgene, inhalation, +hemorrhoids .....	1

Gas, N. Y. D.—		
phosgene, contact and inhalation.....	2	
yperite .....	6	
yperite, contact .....	3	
yperite, inhalation .....	1	
yperite, contact and inhalation.....	19—	1,049
Sprains, ankle .....	3	
ankle (iron falling on foot).....	1	
knee, right .....	1	
ligament, inguinal, left.....	1	
shoulder, lifting box.....	1—	7
G. S. W., arm, right.....	2	
back .....	1	
breast .....	1	
hand .....	1	
head .....	1	
knee, left .....	1	
leg, right .....	1	
multiple .....	3	
wrist, left .....	1—	12
Shrapnel, head .....	1—	1—1,235
Grand total .....		<u>4,345</u>

Of the 4,345 patients cared for by the medical service, there were only fifty deaths, or 1.08 per cent, of whom forty-nine were members of the A. E. F. and one a French soldier.

The following table will show what part the Influenza epidemic played in the death rate of the medical service:

#### DEATHS

Broncho-pneumonia .....	6
Broncho-pneumonia, following gas inhalation.....	3
Broncho-pneumonia, following bronchitis, acute.....	2
Broncho-pneumonia, following la grippe (French).....	1
Broncho-pneumonia, following influenza .....	22
Broncho-pneumonia, following influenza and gas.....	1
Diabetes mellitus and pulmonary tuberculosis.....	1
Gas inhalation, yperite .....	1
Influenza .....	1
Lobar pneumonia .....	1
Lobar pneumonia, following influenza .....	3
Lobar pneumonia, with empyema, following influenza.....	1





PERSONNEL HOSPITAL C



HOSPITAL C, HOTEL DE LA PROVIDENCE ANNEN



Lobar pneumonia, pneumothorax and emphysema.....	1
Meningitis, meningococcus .....	1
Meningitis, pneumococcus, following broncho-pneumonia fol-	
lowing gas .....	1
Nephritis, acute, following broncho-pneumonia.....	1
Nephritis, acute, following influenza.....	1
Typhoid fever, following influenza.....	1
Tuberculosis, pulmonary, following bronchitis, acute.....	1
Total .....	50

The following is a table of the rank of patients treated in the medical service:

Captain .....	12	Sergeant .....	262
First lieutenant .....	35	Corporal .....	411
Second lieutenant .....	18	Private .....	3,528
Chaplain .....	2	Y. M. C. A.....	2
Nurse .....	66	French civilian .....	7
Civilian employe .....	2	Total .....	4,345

The age of patients ranged from three years to fifty-one years, the younger ones being French civilians. However, a number of members of the A. E. F. were fifteen to eighteen years of age, and 57 per cent were between the ages of twenty-two and twenty-six. The following table throws some interesting light on the age of our fighting men:

#### AGE OF PATIENTS

Age	Number	Age	Number	Age	Number
3 (civilian).....	1	27 .....	261	40 .....	18
5 (civilian).....	1	28 .....	242	41 .....	13
15 .....	2	29 .....	178	42 .....	8
17 .....	7	30 .....	164	43 .....	3
18 .....	36	31 .....	131	44 .....	7
19 .....	153	32 .....	95	45 .....	6
20 .....	204	33 .....	36	46 .....	3
21 .....	224	34 .....	38	47 .....	5
22 .....	462	35 .....	25	48 .....	1
23 .....	545	36 .....	17	50 .....	2
24 .....	473	37 .....	12	51 .....	1
25 .....	384	38 .....	14	? (French).....	229
26 .....	335	39 .....	9	Total .....	4,345

The medical service was called on to take care of the French civilians as often there was no French doctor to be had in Contrexéville. Seven of these were cared for in the hospital for pneumonia. Many cases were treated in their homes and Base Hospital 32 has several obstetrical cases to its credit among the native civilians.

The contagious cases were isolated in a small brick house of three rooms separated from the hospital proper, where, under the most inconvenient circumstances with a nurse and an orderly in attendance, the cases were isolated until recovery. Late in 1918, a contagious hospital was opened up at Vittel and all contagious cases were sent there, after being isolated in the little brick house until diagnosis was positive. Care was continuously exercised to diagnose contagious or suspicious cases immediately so that no epidemic might occur. To this end, a throat culture of every member of the personnel was made when a case of diphtheria developed in one of the wards of Hospital C. This precautionary measure disclosed four members of the command to be diphtheria carriers and three other members with active diphtheria in the initial stages. The cases were isolated and the spread of the disease checked at the onset. The carriers were given antitoxin until a negative culture was obtained before they were returned to duty. While the task of making hundreds of cultures was enormous, the medical service felt well repaid by the results obtained.

On another occasion the Schick test was made on all members of the personnel and all showing a positive reaction were treated with antitoxin until a negative test resulted. As a result of such constant vigilance, there was no epidemic in the hospital—a remarkable fact considering the crowded condition of the wards during the summer and fall of 1918.

## X

### DEPARTMENTS

#### *Nose, Throat and Ear*

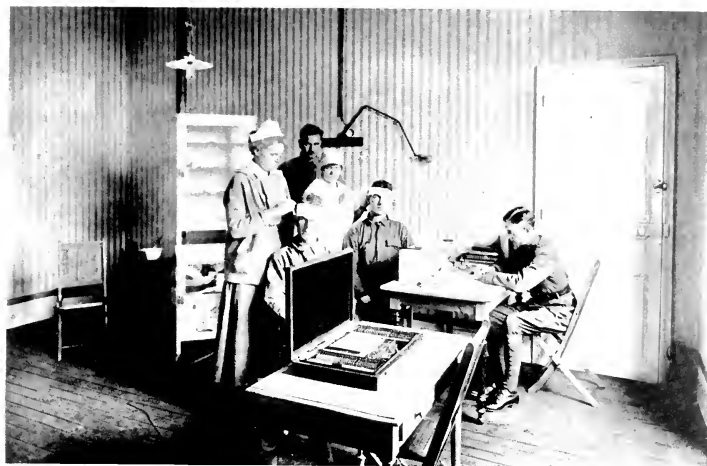
THE importance of the nose, throat and ear work in Base Hospital 32 is better appreciated when it is realized that almost six thousand gas cases, or approximately sixty per cent of the total number of patients admitted to the hospital, were treated and cared for by this department.

Major Lafayette Page, whose distinguished service in the treatment of gas cases won him recognition throughout the French and Allied Medical Service, as well as the A. E. F., was officer in charge of this department, assisted by Captain C. W. Banner and Lieutenant Albert Barr. The department also included Dixie Borders, Sergeant John Carroll and Jay Connaway.

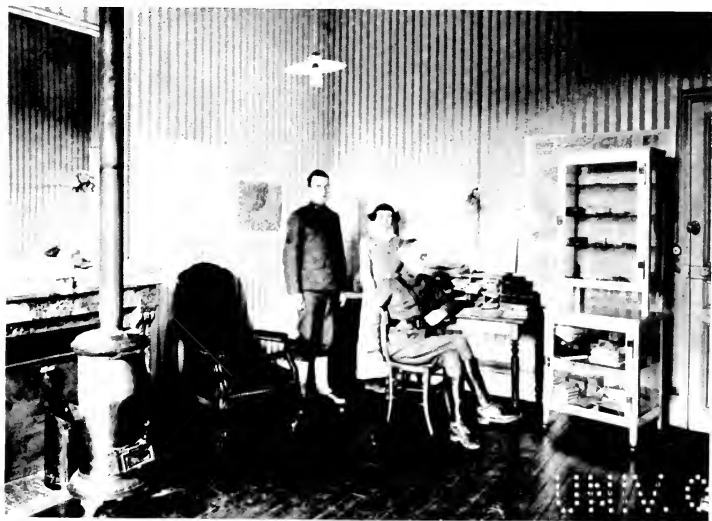
The examination and consultation rooms on the first floor of Hospital A were equipped and ready for service by March 1, 1918. Owing to the prevailing epidemic of influenza in the Spring of 1918, the service in this department was kept busy from the start, treating affections of the throat and bronchial tubes, often involving the accessory sinuses of the nose and ear. Many operations for the removal of tonsils, sinus and mastoid operations, corrections of deviated septa, etc., were performed on the unit's officers, nurses and enlisted men while waiting to receive patients from the front. After patients began to arrive from the front there was an increasing demand for examinations of throat and ear cases. It was soon realized what a handicap the soldier suffered who had diseased tonsils and had to undergo the exposure of trench warfare. Infections of the throat involving the ear and accessory

sinuses of the nose and frequently causing heart, kidney and rheumatic affections, kept up a constant stream from the front to the base hospitals of this class of patients. During the months of May and June, 1918, large numbers of patients were brought in suffering from suppurative otitis media. The majority of these patients gave a history of tonsillar disease and discharging ears during childhood which had been quiescent for years until exposed in the trenches to dampness or shell fire. These cases all had to be examined very carefully as well as the non-suppurative cases of ear disease. A large number of so-called "shell shock" cases with apparent total deafness without any visible lesion had to be differentiated from the malingerers. These cases required most elaborate examinations to detect the frauds who were trying to evade duty. The department's service in treating this class of patients and getting them back to the lines, and detecting the malingerers was often complimented by the general consultant, Colonel McKernan.

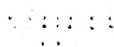
One of the most important and arduous duties of the throat and ear service throughout the war, after the introduction of poison gases by the enemy on April 22, 1915, was the treatment of gas burns of the respiratory tract. The Allied Medical Service was completely overwhelmed for a time by the great number of casualties and without knowledge or means of proper treatment. When Base Hospital 32 received its first convoy of gas patients in March, 1918, the only treatment developed by the Allied Medical Service which was regarded of value was the use of oxygen and watery alkaline sprays for the nose and throat. As there was not an oxygen tank in the hospital center, we naturally had to resort to other treatment. At this time, March, 1918, the enemy was using mixed gases, thrown over with shells from trench mortars and heavy artillery. The attack usually began with gases



EYE DEPARTMENT, HOSPITAL A



NOSE, THROAT AND EAR DEPARTMENT, HOSPITAL A



which produced excessive sneezing and filled the eyes with tears, these being followed by the more poisonous gases, mustard and phosgene. From March, 1918, to November 11th, the close of hostilities, Base Hospital 32 had six thousand gas cases, including every variety of gas poisoning from the slightest intoxication to the most violent and destructive forms of poisoning. Twenty-eight hundred of this number were of the more serious nature. Many patients died en route in the ambulances, on whom postmortems were made and the findings noted. Excellent water color sketches were made by J. Connaway of the postmortem appearance of the respiratory tract and lungs, illustrating the destructive effects of the gases on these organs.

The greater number of fatalities was due to the effects of phosgene and mustard gas on the respiratory tract and lungs, although the latter produced most persistent and painful burns of skin and eyes. Hospital attendants were often painfully burned by contact with clothing or blankets which had been exposed to mustard gas.

The first convoy of gassed patients was received at 5 p. m., March 23, 1918. These patients were principally from Companies K and M, 165th Infantry, 42nd Division (Rainbow), and were gassed in the Loraine Woods near Luneville, American Sector, Wednesday and Thursday, March 20 and 21, 1918. No one had ever witnessed such suffering and distress as these patients manifested. With skin burned and discolored, eyes swollen shut, spasms of choking, vomiting and struggling for breath, with lungs literally drowned with their own lung secretions, they writhed in pain until they became unconscious for want of oxygen. The first severe effects of the gas were usually felt in the eyes at varying intervals of from one to three hours after the attack. The respiratory effects developed very much later, extending from a few hours to several

days after the attack, excepting in those cases exposed to a high degree of gas concentration, in which death took place at once. The eyes were usually swollen shut and pouring out large quantities of secretion, associated with burning pain and intolerance of light. Nausea, retching and vomiting with pain and oppression over the chest were among the earliest and most persistent symptoms, followed later by coughing and spasms of the glottis, with excessive discharge of frothing mucus, often mixed with blood. It is the rapid accumulation of this fluid in the lungs which constitutes the immediate danger to life, since it interferes with the respiratory exchange in the lungs and leads to severe want of oxygen, which is indicated either by deep cyanosis or by pallor and collapse. The deeply cyanosed or leaden-colored face, the quickened respiration and rapid pulse, the restlessness, the constant and spasmodic efforts to expel the profuse, frothy expectoration, was the usual clinical picture during the first two or three days. After that came the secondary stage, when the extensive burns in the throat, bronchial tubes and lungs became infected and began to suppurate. As the necrotic process advanced, large quantities of exudate, consisting of broken-down tissues, tube casts, greenish-gray masses of membrane, and sometimes necrotic lung tissue, were thrown off in the bronchial discharge. During this stage the breath was very foul from the gangrenous discharges, and the patient, utterly exhausted from the absorption of poison and the constant spasmodic and ineffectual efforts through coughing to expel the accumulated slough, would lapse into a semi-conscious state. It happened more than once that there were several hundred of these cases of more serious forms of gas poisoning grouped together in the hospital wards at one time, and not being able to use any form of opiates for relief of



their terrible distress, lest the end be hastened, the resources in the face of such suffering were very limited.

At this time the Allies had not developed any treatment for the effects of poison gases in the respiratory tract which was satisfactory. Oxygen was used to meet certain indications, but there was not a single oxygen tank in that hospital center during the early months of our service. Apparently alkaline antiseptic washes, which were recommended, increased the suppuration and aggravated the patients' condition. The hospital was at liberty to institute any treatment that promised relief, so the combined force of physicians and nurses worked night and day and gave their best efforts to help these poor fellows in any way they could.

The first object was to relieve the exhausting spasms of ineffective cough without the use of opiates, and next to obtain better drainage of the lungs and respiratory tract and thus facilitate the healing process. For these purposes it was found that intra-tracheal medication was the most effective. The medication in oil solution was introduced with a tracheal syringe during inspiration, when the glottis is open. Assistants could easily be trained for the trick of introducing the syringe and administering the medicated oils to the trachea and smaller bronchi. In some cases peculiarly sensitive to any kind of throat medication it was at first necessary to sponge the pharynx with a two to four per cent solution of cocaine before introducing the syringe. The principal solutions used were of guaiacol, camphor, menthol in alboline or olive oil, five per cent of each, through the early stages. Antipyrine in the same proportion was used when the spasms were excessive. Applications through the bronchoscope to the ulcerating surfaces, of silver nitrate or argyrol, were used effectively in some of the very chronic cases.

When the oil solution reached the deeper bronchi, the first effect was to produce a cough which expelled the contents of the trachea and bronchi, often consisting of large casts, the products of inflammation and suppuration which had accumulated in the trachea and smaller bronchi and which previous efforts at coughing had not been sufficient to expel. After these injections the cough lasted only a few seconds, the patient then experiencing a sense of relief and general comfort throughout the lungs. Easier breathing and better oxygenation were at once noticeable as well as a diminution of the general toxic symptoms, and following the treatment came more restful sleep and rest of the respiratory organs. The natural drainage of the lungs and bronchial tubes was facilitated by the oil solution through contraction of the swollen membranes from the camphor-menthol, while the guaiacol acted as a local antiseptic and anæsthetic. Without exception these patients expressed themselves as receiving great relief and when suffering requested the treatment.

The patients who received this treatment usually made a rapid recovery and many of them were able, considering the damage to the respiratory tract, to return to the lines in a surprisingly short time.

The results were so encouraging in Base Hospital 32 that the treatment was recommended in the official bulletins of the Allied Gas Service in April, 1918, and adopted in many of the other base hospitals of the A. E. F.

In this connection the official history of the Indianapolis Chapter of the American Red Cross\* is quoted as follows:

The work of Lilly Base Hospital in this field attracted attention throughout the Allied armies. It was an important contribution to the cause of medicine in the war, and

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\*: *A Red Cross Chapter at Work*, by Marie Cecile and Anslem Chomel.

will, it is thought, be of great value in the treatment of bronchial trouble in civil life. Other hospitals, Johns Hopkins among them, sent members of their staffs to "32" to observe the method of treatment, which was widely copied in our own and English hospitals and became, in fact, the standard in the A. E. F., being set out in a bulletin by Colonel H. L. Gilchrist, medical director of gas service in the A. E. F., side by side with a report of the Chemical Warfare Medical Committee issued by the Medical Research Committee of the British Army, and a report of observation in gas cases by the heads of the British and French gas services.

### *X-Ray*

The X-Ray Department of Base Hospital 32 was under the direction of Lieutenant Raymond C. Beeler, assisted by Lieutenant Ralph L. Lochry. The enlisted personnel assigned to this department were Sergeant George E. Magee, and Charles S. Stough, Walker Marshall and Leslie Summers.

The original X-Ray equipment of Base Hospital 32 was the best and most complete that could be bought. It was larger than the average and comprised everything that is used in the modern X-Ray department of the better hospitals in the United States. The transformer was of the large auto transformer type, approved by the surgeon general's office, and there was a large fluoroscopic table with tube stand attached for roentgenographic work of any kind.

A large stereoscopic plate changing tunnel made chest work very easy and rapid, and an erect fluoroscope made it possible to study stomachs and chests in the upright position. This apparatus was more than the average for a five hundred bed hospital, and went to form a large nucleus of the equipment when the hospital became of

two thousand two hundred and fifty bed capacity. To the original equipment were added two U. S. Army Bedside units, Radiator type Coolidge tube, a standard transformer, combination table with accessories, and numerous smaller appliances used in localization of foreign bodies. Some of the later equipment was brought over by the Iowa Unit, and it was this outfit that made an X-Ray department possible in Hospital E of the medical section.

The main room of the X-Ray department was located on the first *étage* of Hospital A, the Cosmopolitain. It was a large, high-ceilinged room, conveniently located near the surgeries and dressing rooms, and affording ample space to accommodate the department even during the rush times. Another room farther back on the same floor was used as an office and plate room.

The installation of the equipment required several weeks and entailed a number of difficulties. The most serious obstacle that was confronted was the wrong type of electric current. In order that the current might be adapted to the equipment, it was necessary to procure a large rotary convertor. The department was fortunate here in having a friend in Lieutenant-Colonel Hickey in charge of X-Ray supplies in the A. E. F., and after a number of requisitions, backed up by personal letters, a suitable convertor was procured.

Shortly after the convertor arrived it was discovered that it would be necessary to run a new electric line from the power plant to the X-Ray rooms. The power plant was a small one with storage batteries supplying the town and the hotel buildings, and was later taken over and operated by the United States Army. As soon as the new line was connected Sergeant Magee, with the aid of a number of other enlisted men acting in the capacity of electricians, carpenters and plumbers, began the work of

installation. Sergeant Magee, an expert X-Ray technician in civil life, effected a type of installation that differed radically from any other X-Ray installation in the A. E. F. at that time. This arrangement proved to be so highly satisfactory and so efficient that it was afterward copied by experts from headquarters and reproduced in other hospitals.

During the absence of Lieutenant Beeler, while on detached service at Base Hospital 15 at Chaumont, the installation work progressed under the direction of Lieutenant Lochry. Following the return of Lieutenant Beeler, Lieutenant Lochry was ordered away with a surgical team, and was eventually transferred to Liverpool, where he was placed in charge of the X-Ray department of A. R. C. Hospital 4. During Magee's illness, and after his transfer, Leslie Summers assisted largely in the technical work. It was Summers, also, who made the X-Ray tables and accessories which were so badly needed later to take care of the increased number of wounded, and which could not have been obtained from any other source.

The work of the X-Ray department, following the arrival of a large convoy, was of unusual importance, as practically every surgical case was examined. When the convoys arrived, the patients were first given nourishment and were then started through the X-Ray room. The most serious cases were taken first, and their wounds searched for foreign bodies. The skin was marked wherever any such foreign bodies were located, and a description of the number, size, kind and depth of the foreign bodies dictated to one of the men, generally Marshall. Marshall became very speedy at this, and both he and Summers assisted in the localization at times, relieving Lieutenant Beeler whenever he was called out to the surgeries.

As the Allied drive developed, the department was soon handling large numbers of wounded with remarkable dispatch. Lieutenant Beeler's localizations became so accurate as to excite the admiration of all of the surgeons, and the department was able to maintain a speed sufficient to feed all the surgical tables. Fractures were also found and if necessary X-Ray plates were made and sent to the dark room, where Stough would develop them and be ready to report in ten minutes. This was the usual procedure during rush times.

When the last patient in the convoy had been localized, the department would get back to the regular routine work of making chest, sinus, stomach, and other examinations. Fracture cases were adjusted under the fluoroscope. Patients that were not able to be moved from their beds were examined with the U. S. Army Bedside X-Ray machine. All these sorts of examinations were made between convoys, and rarely was the department without work.

According to the records of Base Hospital 32, more than half of the patients admitted to the hospital received X-Ray examinations. Similar figures prevailed in almost every American hospital in France, and statistics show that fifty-four per cent of the sick and wounded in the A. E. F. were examined by the X-Ray. The value of the X-Ray was never entirely realized until the war. Without it, it is safe to say that the mortality in war surgery would have been double.

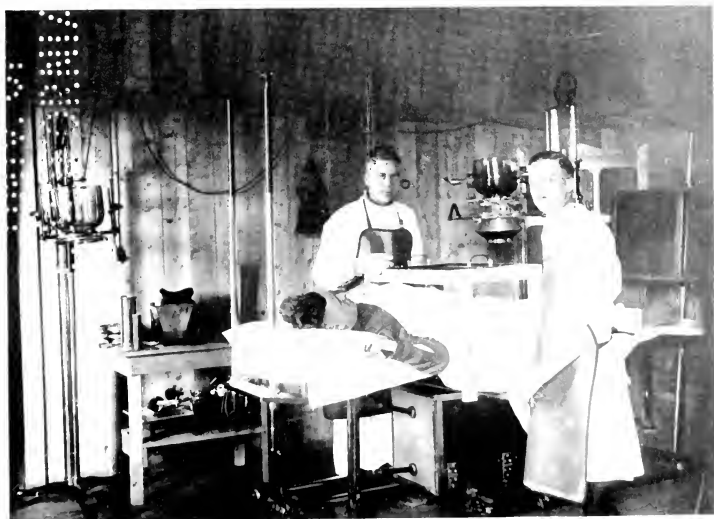
### *Anesthesia*

No other hospital in France made as great progress in practical anesthesia as Base Hospital 32 and the Vittel Hospital Center. As with the entire A. E. F., ether was the anesthetic of choice in "32." Chloroform was used to a great extent by the British and French, but the Amer-





LIEUTENANT BEELER WITH A DELEGATION OF FRENCH OFFICERS  
INSPECTING THE X-RAY DEPARTMENT



X RAY DEPARTMENT, HOSPITAL A



icans, with their knowledge of its dangers, used but little of it. There was a time when good ether was unavailable in France, and chloroform was used to an extent then, but not with the official sanction of the general medical staff.

As there were not enough medical officers to take care of the anesthetic work, most of this was done by nurses and hospital orderlies under the instruction of a medical anesthetist. Captain Arthur E. Guedel, M. C., U. S. A., was in charge at Base 32, with Margaret Henke, Sarah Greenhalgh, Hazel Alkire, and other nurses as regular assistants. In rush periods medical officers on duty elsewhere in the hospital would assist with the work.

It was in Base Hospital 32 and the Vittel Medical Center that a combination of ethyl chloride, chloroform and ether, administered under a closed hood, was developed for all short operations and general induction of all ether anesthetics. The idea of this method was copied from the French, who used the same anesthetic agents in slightly different proportions for short anesthetics—it being left to the Americans to apply the time-saving principal for the induction of ether narcosis. Whereas with straight ether the induction of ether was from ten to twenty minutes, with this combination and method, this induction time was reduced to from one to two minutes. After a study of its effects in two thousand cases in the Vittel Center, the method was presented to General Headquarters and was accepted, although not officially adopted, for the entire A. E. F. This, however, was but two months prior to the signing of the armistice, and there was not time to place it in all hospitals. It was used in some forty thousand cases, as nearly as can be reckoned, and the total time saving is almost incalculable.

Nitrous oxide and oxygen, in combination, was the

anesthetic of choice officially adopted by the General Medical Staff, but its general application failed for two reasons. First, there was a great shortage of apparatus for its administration, each hospital having but one machine, and many of these not delivered until late in the war. Secondly, the technique of its proper administration was a thing too difficult to teach in any short period of time. It is probably true that in the consideration of the adoption of this method, the General Medical Staff was misinformed on this question of technique by some enthusiasts who knew but little about it. Nitrous oxide and oxygen, theoretically, is the anesthetic par excellence for all general work, but its difficulty of proper administration rendered it of little value in war surgery in France. Some hospitals had anesthetists who were qualified to handle it, but these were by no means sufficient to cover even one-tenth of the anesthetics administered. Therefore, the final general method of choice during the rush period and just before the armistice was signed was ether by the open drop method, the induction being accomplished with closed administration of ethyl chloride, chloroform and ether.

In Base Hospital 32 there was developed another novelty in anesthesia which was a general improvement over previous methods. This was the adaptation of an auscultation tube to a simple apparatus for the par nasal intrapharyngeal administration of ether. This auscultatory tube aided in the determination of the degree of anesthesia present in any case without necessitating the close inspection of the face of the patient, which, in head surgery, is usually well covered by sterile draperies, and inaccessible without disturbing the field of operation. This apparatus and method also disproved the old idea that for intrapharyngeal anesthesia it was necessary to blow the ether

vapor into the pharynx with a bellows or motor blower. It was found that with the intra-nasal tubes in place, the patient, through the process of his natural respiration, would aspirate a vapor of ample concentration and volume to maintain proper anesthesia in all cases. Inasmuch as the blower part of any apparatus for intra-pharyngeal anesthesia is the most complicated and expensive—and in France the least available—part of the apparatus, the discovery of this principle of vapor aspiration simplified matters considerably for head surgery anesthesia. This method is now being carried on in civil practice in America.

Both the ethyl chloride, chloroform and ether rapid induction, and the auscultatory, vapor aspiration methods have been published in the American Journal of Surgery by Dr. Guedel, the former under date of April, 1919, and the latter the same year.

## XI

### DEPARTMENTS (Continued)

#### *Laboratories*

THE Central Laboratory at Contrexéville, which served both Base Hospitals 31 and 32, was organized in April, 1918, and was located in the Harmand Hotel, Hospital No. 3 of Base Hospital 31. Seven rooms on the second floor of this building were given over for laboratory purposes. Suitable plumbing was installed and equipment was furnished from the laboratory supplies of both organizations. A mortuary was established in the basement of the Hotel Harmand Annex.

It was expected that the Central Laboratory would do all serology, bacteriology and pathology, as well as some clinical tests. For the convenience of the different hospital staffs, however, small subsidiary laboratories were established in the Cosmopolitain, Providence, Royal, Continental, Harmand and the Martin Aine.

The Central Laboratory staff as originally designated was as follows: Lieutenant Scott R. Edwards, officer in charge and serology; Lieutenant David R. Farley, wound bacteriology; Lieutenant Elmer Funkhouser, autopsies and microscopic pathology; Lieutenant Walden E. Muns, general bacteriology.

On April 13, 1918, Lieutenant Edwards and Farley were ordered to Epernay for a ten-day course in wound bacteriology. Shortly after their return Lieutenant Edwards was relieved from further duty, and was succeeded as officer in charge by Lieutenant Farley. Lieutenant E. J. Wehman was assigned to the vacancy on the staff.

On April 26th Lieutenant Funkhouser was ordered to

the 42d Division, returning to Contrexéville and resuming his former duties with the laboratory on June 21st. On June 29th Lieutenant Funkhouser received another order transferring him to Dijon for a five-weeks' course in serology. Meanwhile Lieutenant Wehman was absent from June 30th to July 29th, having been ordered to Mobile Hospital No. 39 for temporary duty.

The enlisted personnel of the Central Laboratory and subsidiaries was as follows: Sergeant Don Westfall, Sergeant H. H. Hollingsworth, Sergeant Pierre S. Morgan, Sergeant Berl C. Shearer, Sergeant Frank H. Judson, Sergeant Raymond Johnston, Sergeant Walter Howlett, Sergeant P. A. Vanderschouw, Corporal Paul Matthews, Corporal M. R. Fox, Louis Stuart, Edward H. Newell, Harry W. Fisher and Dickson Lynch.

By the end of May the Central Laboratory was completely organized with the exception of the Serology Department. This department did not begin functioning until Lieutenant Funkhouser returned from Dijon to take charge of it. From that time on it did the serology for all four hospitals in the center, as well as the anatomicopathology for Base Hospitals 31 and 32.

Lieutenant Funkhouser was assisted in the serology work by Sergeant H. H. Hollingsworth. Wasserman tests were made on Tuesdays and Fridays, the number of blood tests varying according to the number of patients in the hospitals. More than six hundred such tests were made by this department before the hospitals were closed. The number of positive Wassermans from soldiers was probably no greater than is found in civilians.

The autopsies were performed in the morgue, there being no other room available for this work. The army regulations required that all soldiers dying in the service should come to autopsy whenever circumstances would

permit. This greatly increased the laboratory work. Two hundred and fifty-four autopsies were performed before the laboratory was closed. Records of the month of October alone show one hundred and twenty postmortems. Sergeant Pierre Morgan acted as undertaker for the two hospitals and deserves credit for the manner in which this work was handled.

The Bacteriology Department, under Lieutenant Farley and Muns, also saw intensive service. An average of more than five hundred cultures were made monthly. The volume of wound bacteriology, however, was not as extensive as had been anticipated. Often during periods of rapid evacuation the surgical patients did not remain long enough to benefit by bacteriological examinations.

The clinical pathology was done largely in the subsidiary laboratories. These laboratories were in charge of enlisted men who had been trained for the work by officers of the Central Laboratory staff. An average of approximately fifteen hundred tests were done monthly.

### *Orthopedic Service*

The original plan of organization of Base Hospital 32 did not include a separate orthopedic service, but merely an orthopedic surgeon as a part of the general surgical service. This was no doubt due to the fact that the treatment of compound fractures was to be considered as general surgery.

In organizing the different departments in Contrexéville no special arrangements were made for a fracture service (which class of cases later constituted ninety per cent of the work done by the orthopedic surgeons), and very little was done in the preparation of splints and equipment.

Shortly after the hospital's arrival in France, Captain

Eugene B. Mumford, who had been designated as orthopedic surgeon, was ordered to Belgium on detached service, and was later transferred to an American surgical team and assigned to the French army at Grandevillier, Oise. During the early months of the hospital's service, while Captain Mumford was absent, the few fractures that came in were handled without much difficulty, but in June, when convoys began coming directly from the front, the necessity for a well-organized fracture or orthopedic service became apparent. Upon Captain Mumford's return to Contrexéville, early in July, 1918, the commanding officer directed him to organize such a service, and ordered that all wounds involving the bone should be assigned to this department.

The personnel of the orthopedic department originally consisted of Captain Mumford and Irwin C. McDonald. A room on the surgery floor of Hospital A was assigned to the department and filled with all varieties of splints and accessories.

These preparations came none too soon. The first three days after the organization of the department one hundred and thirty-two compound fractures were scattered over the first floor of the Cosmopolitain, all to be taken care of by one surgeon and an inexperienced assistant.

Gradually, however, these days of confusion became days of system and order, and the care of the fractures became proportionately easier. The daily dressing of the many compound wounds was organized with Miss L. V. Beck in charge. Five Dakin carts or "crews" were under her direction, and it was only through her long hours of labor and the capable assistance of the ward nurses that the volume of work handled by the department was made possible.

It is greatly to the credit of Captain Mumford that in a

few short weeks and with very little to start with, he built up one of the most efficient orthopedic departments of any base hospital in the A. E. F.

During the period of the hospital's greatest activity the orthopedic service cared for an average of about three hundred and fifty cases, practically all of which were compound fractures. A record of 689 patients was kept, but these comprised only the more seriously wounded and did not include the many minor wounds and "flat feet" cases. One hundred per cent of the bomb wounds, eighty-seven per cent of the high explosive wounds and ten per cent of the machine gun wounds were infected. Notwithstanding this there were but two cases of tetanus and only four amputations, all of which were due to gas infection. There were nine deaths.

The close co-operation of the X-Ray department under Captain Beeler with the orthopedic service was a source of great benefit to the patients. Most of the fractures were reduced under the fluoroscope.

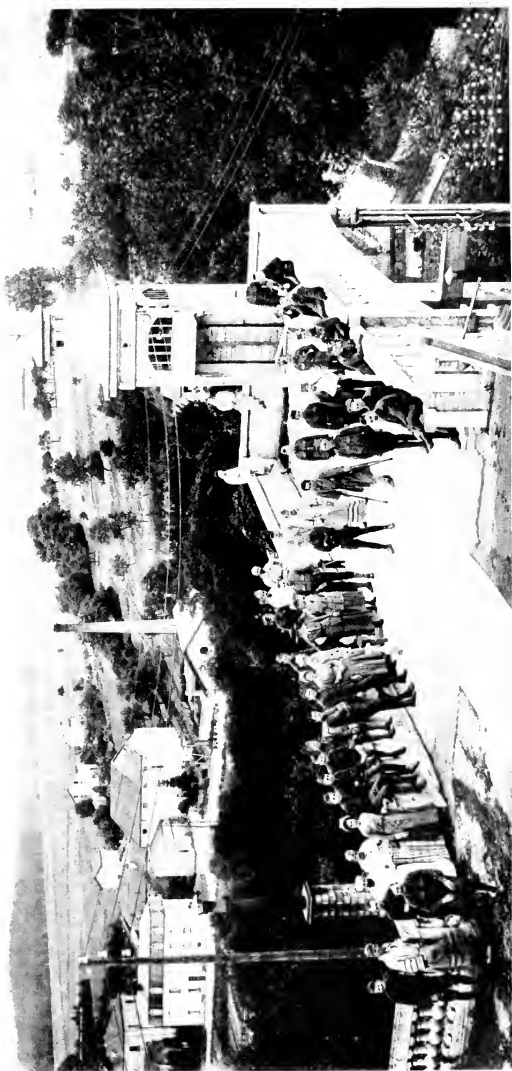
The orthopedic department of Base Hospital 32 was the first in the A. E. F. to use a special anesthesia for dressing wounds. This anesthesia, as suggested by Captain Mumford and developed by Captain Guedel, not only promoted the efficiency of the department, but reduced the suffering of the wounded to a minimum.

The personnel of the department was later augmented by the assignment of Lieutenant F. H. Murray and Captain Alphonso Meyer. These officers came at a time when their services were badly needed and both of them became valuable assets to the orthopedic service.

### *Neuro-Psychiatry*

The work of Base Hospital 32 in this interesting field is related in the following account by Major Chas. D.





VIEW FROM THE COSMOPOLITAIN

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Humes. Major Humes was consulting neurologist for the Vittel-Contrexéville Hospital Center.

The part which Base Hospital 32 played in the great war I can better appreciate and describe because of my being only partly attached to it and associated with three other base hospital groups at the same time, which afforded me the opportunity of comparing the work of Base Hospital No. 32 to Base Hospital No. 31 of Youngstown, Ohio—Base Hospital No. 23 of Buffalo, N. Y., and Base Hospital No. 36, of Detroit, Mich.

In the early part of the conflict the medical department, under Major Kennedy, accompanied the greater number of cases, as it was at this time that the large number of psycho-neuroses arrived. Not too much credit can be given him for his efforts in isolating these cases and making it possible for our department to make daily review of all neuroses in the hospital.

Captain Robert M. Moore had more direct charge of these cases than any other one of the medical staff and I recall with the greatest pleasure many hours we spent together in the old Hotel Royal at Contrexéville.

The review of the work can be divided into: (1) the psycho-neuroses; (2) brain and spinal cord injuries; and (3) peripheral nerve lesions, psychoses, and miscellaneous.

A neuroses is the expression of an attempt to adjust oneself to an unpleasant circumstance or situation, the degree proportionate to the failure of the individual. It is a natural mental defense unconsciously established, which affords the apparently easy way out of a difficulty. It is the outgrowth of unhealthy mental habits, the result of careless indifference and fostered chiefly by innate selfishness. It manifests itself in civil life as pettiness, peevish-

ness, instabilities, inadaptabilities, lack of responsibility which grow into the fear of same, restlessness, irrelevant nervousness, fickleness of nature and conduct, disregard of rights and feelings of others, abiding concern of self, vague apprehensions, needless worries, morbid reflections, etc.

It should be classified as a psychoneurosis, manifesting any or all of the unnatural psychic reactions which do not completely overrule judgment and approaches the borderline of the psychoses so closely that distinction is more easily made than a difference and under the nomenclature of neurasthenia, psychasthenia, nostalgia, insomnia, etc., it has made its way into our literature and clinical discourse. With changing environment it is a livable possibility. The individual so constituted can accomplish his or her purpose so long as there exists the actual changing scene or possibility of that is not denied, or at least can make the passing grade, avoid the public charge of incompetency and maintain the respect of the average community. It is common to all ages from accountability to senility and requires for its demonstration only such a man and a circumstance, not of his finer choosing.

With this meager portrait before us of man's reactions in civil life we can rapidly pass to his war record. Military training and life worked its greatest hardship on these nonplastic, self-centered inadaptabilities. Their circumstance was too unpleasant, its constancy unbearable, the scene unchanging. With no chance of relief in sight and no pleasure in present pursuit, they naturally fell a victim to one of the many war manifestations.

I can speak intimately of the three periods of our activities: (1) the precombatant; (2) the combatant; and (3) the postcombatant.

Each differs in both the nature and extent of the reac-

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PRESENTATION OF D. S. C. TO BASE HOSPITAL 32 PATIENT



PARADE, JULY 4, 1918

tion. Of the first, all is included from the day of enlistment or draft to the time of the American sector engagements. All ranks and all men are included in this review—West Point, Annapolis, regular army, those who had seen island and Mexican service and the rawest recruit—college professors, lawyers, doctors, dentists, ministers of all denominations, scientists, engineers, railroad, motor transport, bankers, farmers, and manufacturers. There was no pursuit of life, no trade or profession, no social scale untouched and these were our standard American citizens, examined, passed by boards and stamped fit.

Although expecting much of this display, my clinical greed was soon satisfied. There were times in March, 1918, when I wondered when our army was going to adapt itself or adopt its circumstances. A constant state of pure old-fashioned homesickness pervaded every camp. That became more apparent as the gloomy days of early April came on, a factor which I was loath to accept at first, but it became definite and distinct. The men were in so-called training areas, trying mostly to get warm and adapt themselves to France, her tongue and her weather.

We had but one neurologic hospital in operation at that time. It was constantly crowded with officers and enlisted men, no transport return service established, the Bay of Biscay only to our backs and more patients coming in each day. The patients were almost entirely unwounded excepting the great number of self-inflicted wounds, incident to.

The English in the first two years of the war pensioned ninety per cent of their war neuroses. The French sent ninety per cent of theirs back to the lines in ten days. Having brought our men some three thousand miles at an average cost of \$1,000, it behooved us to keep the majority

near the line also, knowing, too, that England was then re-educating her formerly pensioned men successfully, even after two years' invalidism. We adopted the same course early at No. 8, Savenay, the Post Graduate Hospital, New York.

While I consider a war neurosis only an exaggeration of the civil type, its unusual manifestations were most interesting. The so-called shell shock, a pure warlike name for extreme nervousness, was successfully handled by first, kindly, gently quieting the patient, obtaining his confidence, evincing no lack of sympathy, yet firmly setting him on his feet, about face, and starting him back. Not easy then with the smell of salt air in your nostrils—at the port of debarkation, boats unloading under your very eye and going back with room aboard. The majority of these "shell shocks" had been acquired en route from Hoboken, many never having reached even the training areas.

In May the hospital for neuroses was opened at La Fouché near the American Army sector and only the borderline cases came down, "unfit for further service in the A. E. F.," the papers would read.

So you have it in the first period, nervousness (shell shock), night terrors, fainting spells (and always marked epilepsy), gigantic tremors, paresis, palsy, bizarre gaits, mutism, etc.

2. Combatant Period—The Chateau Thierry drive alone netted the Vittel-Contrexéville Center some seven thousand casualties, among these six hundred so-called shell shocks, exhaustion, etc. Of this number all but twenty-three returned to duty in fourteen days; none of these were injured, simply nervous and exhausted, but exhibiting every phase from aphonia to monoplegia.

The medical chiefs of the center with No. 32 set aside one building of each group for the reception of these



marked cases. After forty-eight hours' rest they were put on hikes, formed into squads and rapidly worked back into duty class. Self-inflicted wounds disappeared when the real activity opened, excepting an occasional one. It was already evident that "shell shock" was unpopular and almost impossible to get such an audible statement in a ward filled with wounded. This was July 15th to August 15th.

Thereafter the psychoneuroses dwindled until in my report for September I mentioned to my chief, Colonel Salmon, the exact source of the cases, so rare were they. In short, the men were victims of exhaustion, and anticipating this it was made the rule after the first drive in July to place the men in rest camps supporting their respective divisions and return directly to their comrades after a few days.

You may imagine that all the neurotics were weeded out in the precombative period, but not so. Rather, many men became re-established and fought their way into good health, self-possession and many to glory and distinction.

3. The postcombatant was ushered in with the most phenomenal convalescence ever witnessed under heaven. Even the hopelessly wounded, the unfortunate head and spine cases, seemed to take a new lease on life, but the erstwhile nervous and depressed were cured before the church bells had tolled twice. But the war was not over. The third army needed replacements and then came an awful slump in morale. The vision of home grew dimmer and instead arose the occupation camps along the Rhine. An order issued at the psychological moment by the neuropsychiatric department saved the day for us, stating that all neuroses would be kept in France until cured.

Officers and men alike suffered the suspense which fol-

lowed, the former more than the latter, since active responsibility gradually diminished and the reorganization developed. Man's mind is not readily adaptable to uncertainty and this became more unbearable as chances for homecoming seemed possible. Relaxation for the first time settled on our army and almost amounted to mental inertia. Our department became busy again and the discipline of the army was sorely taxed. I am convinced that nothing but the rigid discipline which had been well grounded saved the hospital situation through the months following the armistice, and nothing was so important at all times as constant vigilance of these cases. I am certain that the letter of the law was observed, from personal conversations with the staff of 117, the advanced area hospital, and at No. 8, the original debarkation and final one, no case of psychoneurosis returned as such unless bearing the poor prognostic stamp of "unfit for service."

Colonel Salmon reported that not one case of so-called "shell shock" came out of the Argonne, so completely had the word been driven out of the busy army medical corps at the front. Quite different from the first days following Chateau Thierry.

Among officers the most constant affection was psychasthenia with its indecision and fear of responsibility, the cure usually being affected by travel orders homeward. So dangerous was this state of mind that sudden change of orders was disastrous as in the case of a major at port of debarkation, ready to sail, who was ordered back with the third army, who forthwith shot himself through the head. This and many other tragic things marked the closing weeks of reorganization and proves the narrow line which separates the neurosis from a true unsoundness of mind.



THE BISHOP'S FARM



RAILROAD BRIDGE, RIVER VAIR



War neuroses are defense reactions commonly engrafted on a neurotic tendency. Shell shock is a war work and enjoys no distinction truly its own and is not to be confused with the "*commotio cerebri*" so ably described by Marie and his French colleagues. Psychic reactions without motor disturbance was the rule among officers.

The functional disturbances, aphonia, deafness, tremor, paralysis, largely obtained with the enlisted men and with only one exception in my experience associated with shot or shell wounds.

The tendency toward neuroses, especially the acquired war neuroses, rapidly decreased as the army became combative. The success of correction lay in making the entire process of recovery satisfactory to the patient.

It was the constant rule to relieve the patient from any morbid introspection and never refer to the disqualification which brought him into the neuropsychiatric department. The human element was more necessary in correcting and controlling these affections under war conditions than obtained in our regular private practice.

From the nature of the injury received in the combat from high explosives, direct hits and particularly from being thrown heavy, great numbers of cerebral concussion cases resulted. The cases were cared for in both medical and surgical hospitals, particularly the latter if associated with any wound. Some of these cases without any evidence of injury required many weeks for recovery.

The injuries of the brain were the result of either direct bullets or shrapnel hits, or from the result of skull fracture. The location of foreign bodies in the brain was made possible through the wonderful X-Ray work of Captain Raymond Beeler and Captain R. L. Lochry. The work of this department was, to my personal knowledge, second to none in France.

The rule was followed that the patient was operated for neurological relief and not merely to remove foreign bodies, and if the foreign bodies were giving no distressing signs they were ordered left alone and the patient kept under observation. I recall one man in particular who had twelve pieces of metal in his brain and had no neurological symptoms whatsoever.

Our experience with brain wounds furthered our knowledge of cerebro-localization and gave us surprising information as to the extent which the brain can be traumatised without focalizing signs.

The treatment of skull fractures was a very conservative one, absolute quiet, restraint, sedatives, frequent spinal drainage, etc., and absolutely avoiding local treatments to the nose and ears. One interesting case of a man who had suffered a fracture of every bone of the skull and face had bled profusely from all bony crevices, but had at no time suffered a loss of consciousness and made an uneventful recovery after being properly repaired.

The spinal cord cases occupy a distinct place in my professional records. What experience I had enjoyed prior to the war with complete transverse cord lesions was doubly corroborated in my observations in France. The same calm, quiet, undisturbed expression was constant on the face of these fatally stricken heroes of ours. So characteristic was this of these boys mortally wounded with bullet wounds over the fracture of the spine and a complete severance of the cord that I rather enjoyed hearing an outcry of pain from those that were wounded in the back, because it gave me hope that an operation might give them some relief.

On account of the great number of injured which always accompanied the broken back cases, we agreed early, that only the selected ones should be operated. Out of our very





RUE DE L'AISELE LOOKING EAST TOWARD THE  
RUSSIAN CHURCH



THE TOWN CRIER



large experience of these cases we were able to establish a fairly definite formula, that is an immediate loss of sensation and motion, without a return of these functions to any degree within forty-eight hours, means a complete and irreparable cord lesion.

In the peripheral nerve lesions we enjoyed the great experience of learning all over again physiology and anatomy of our peripheral nerves. Our experience in civil life is rather limited in these observations, but with every convoy of wounded which came into our hospital center there were always great numbers of injuries as a result of the fracture bullet wound, hemorrhage and direct concussion of the nerves.

I recall with great pleasure the service with Captain E. B. Mumford, who splendidly cared for fracture cases and frequently presented interesting nerve complications. Nerves were not sutured if an infection was present and if sutured a dry operation was necessarily performed. These cases were carefully charted, sent to the rear and on home, where the majority of the peripheral nerve work was finished. As all such cases require from one and one-half to three years to recover, they were all of no further use to the service.

Among the psychoses we had to deal mainly with the manic-depressive type.

Late in October, during the very heavy operations and a constant downpour of rain, many cases of acute depression came in. I think in most cases it was a question of an early psychneuroses upon which was engrafted the psychoses. Occasionally a constitutional psychopath with some incorrigible tendency would come under our notice. One of the most peculiar types of mania, so-called, was the result of belladonna berry poisoning from which the boy finally recovered. After we had found the cause of

his trouble a special bulletin was issued by the army warning the soldiers against eating the "beautiful blue grapes" in these mountains.

During the month of August, 1921, I reviewed the old hospital center at Contrexéville.

It will be of interest to all of the old members of the hospital and to their friends to know that the hotels which we used for hospitals are now reopened and are very gay with the usual activities of these watering places. The old Cosmopolitain is quite a massive building in peace time and a delightful hotel. The operating tables, the X-Ray outfits and the countless beds of wounded have been replaced by flowers and music and the rooms are now resounding with the gaiety of the pleasure-seeking. Not one of the old hotels but that is in full operation again. The old Casino, which I recall as a bloody scene of daily operation, is now polished, glittering with a display of exquisite traps and games of chance and the various allurements for the gambler has replaced the surgeon's scalpel and splints.

I visited the graves of our boys when we left there and found that each had received the most gentle, painstaking care and not one blade of grass seemed astray. The graves are visited daily by the French of the village and no honor is spared their memory. On every side as I went about—the French were quick to renew the old acquaintance. They have not forgotten us and they are anxious that all of us return and live with them in times of peace.

## XII

### THE A. R. C.

NO ONE who served in the organizations of Base Hospitals 31 or 32 will take exception to the statement that the high rate of success attained by those units, not to mention the comfort and happiness of both patients and staffs, would have been materially lowered but for the able assistance and co-operation of the American Red Cross.

Mr. Lawrence Hitchcock of Cleveland was the first to install this great service in Contrexéville. Mr. Hitchcock's success in leasing the bathhouse and the Casino Theatre and in laying the foundations for many of the subsequent achievements of the Red Cross has been mentioned earlier in the book. The order for Mr. Hitchcock to report to Paris headquarters for duty came as a disappointment to both hospitals, but when it was learned that his successor was to be Mr. William H. Thompson of Indianapolis it was felt that the loss was compensated for most satisfactorily.

The following comprehensive report, written by Mr. Thompson for the Red Cross, at the expiration of his work, speaks for itself and tells to those who were there of the perseverance and expert executive ability it took to accomplish the supplying of so many wants in the face of such tremendous disadvantages as the time and location imposed:

JANUARY 6, 1919.

To—American Red Cross, 2 Place de Rivoli, Paris.

From—Captain W. H. Thompson, Base Hospital Representative, B. H. 31 and 32, A. P. O. 732.

Subject—Report of work of William H. Thompson in the American Red Cross in France.

1. Name—William H. Thompson.
2. Home address in the U. S.—1354 Lemcke Annex, Indianapolis, Ind.
3. Date and Place of Arrival in France—April 13, 1918, Bordeaux.
4. First Assignment—Base Hospital Representative, B. H. 31 and 32, Contrexéville, Vosges. I arrived at Contrexéville on April 29th and assumed charge on May 2, 1918, relieving Captain Lawrence E. Hitchcock.
5. I have had no permanent assignment other than that given above.
6. Superior Officers—Captain Frederick Osborne was at the time of my arrival the commander of what was then known as the Advance Zone. He was succeeded by Captain Nicholas Tilney, who was succeeded by Major Wallace, commander of the Eastern Zone, later by Captain Furlong. Captain J. W. Burdick was the first deputy chief of the Home and Hospital Bureau in this zone. Before his arrival all my business affairs were taken up directly with Captain Osborne. Captain Burdick was succeeded by Captain Furlong. It is impossible for me to give the dates of the incumbency of these respective officers.
7. Personnel—Upon my arrival in Contrexéville the personnel consisted of the following: Mrs. Pearle C. Nicholson, searcher for Base Hospital 32; Miss Isabel D. Brownlee, searcher for Base Hospital 31; Sergeant Francis M. Kerwin of Base Hospital 31, secretary; William Lawless, chauffeur. Until the month of July there was no assistant here to aid me, but during that month the Paris office sent Lieutenant S. LeRoy Layton, who remained through the middle of September, when he was succeeded by my present assistant. Miss Margery Sawyer and Mrs. Lydia C. French were each here for a short time as searchers. The present per-



A VETERAN OF THE FRANCO-PRUSSIAN WAR



THE BARBER SHOP



sonnel of Base Hospitals 31 and 32 consist of the following persons:

W. H. Thompson, Base Hospital Representative.  
T. B. Watkins, Assistant.  
May P. Foster, Secretary.  
Eva E. Sorensen, Directress of Hut.  
Ethel M. Hurley, Assistant.  
Kathleen MacMahon, Assistant.  
Mary K. Taylor, Searcher.  
Genevieve L. Swezey, Searcher.  
Beryl M. Johnson, Directress Nurses Club.  
Edwin Talghadar, Chauffeur.

8. General Nature of Work—The American Red Cross has maintained at Base Hospitals 31 and 32: Bathhouse; theater, up to November 1, 1918; an American Red Cross hut; barber shop; officers' club; nurses' club; convalescent garden and nurses' garden. It has also had a sorting and receiving station for the bathhouse, office and warehouse, and a garage.

The general character of the work here consists of the management of these various activities and the supervising of the distribution of cigarettes, tobacco, newspapers, magazines, shaving supplies, toothbrushes, etc., also the searching and home communication work.

It seems to me that a more definite idea can be given of the entire situation and work here by treating each particular branch of the work separately, and by first giving an idea of the hospital organization and the number of patients received.

#### ORGANIZATION OF HOSPITALS

Base Hospital 31 was organized at Youngstown, Ohio, and has added to it a unit from Syracuse, N. Y. Its commanding officers have been Lieutenant Colonel Adam Schlanser, September 7, 1917, to June 15, 1918; Lieutenant Colonel C. R. Clark, June 16th to July 13, 1918; Lieutenant Colonel J. A. Sherbondy, July 14th to July

17, 1918; Captain A. E. Brant, July 18th to August 21, 1918; Lieutenant Colonel J. A. Sherbondy, August 22nd to September 3, 1918; Captain A. E. Brant, September 4th to September 30, 1918; Major J. L. Washburn, October 1st to November 24, 1918; Lieutenant Colonel J. A. Sherbondy, November 25th to December 31, 1918; Lieutenant Colonel E. S. Van Duyn, January 1, 1919, to—

The chief nurses of this unit, with their respective terms of office, have been: Miss Frances M. Kehoe, September 9, 1918, to November 1, 1918; Miss Sue Austin Wilson, November 2, 1918, to—

Base Hospital 32 was organized in Indianapolis, Ind., and has a unit attached to it from southeastern Iowa.

Its commanding officers, with respective dates of service, have been Major Harry R. Beery, September 1, 1917, to February 13, 1918; Major Edmund D. Clark, February 14th to March 6, 1918; Major H. H. Van Kirk, March 6th to July 14, 1918, and Lieutenant Colonel Edmund D. Clark, July 14, 1918, to—

Miss Florence Martin has been chief nurse of Base Hospital 32 from the time of its organization to date.

The following figures show the total number of patients received by the two hospitals:

PATIENTS		
	B. H. 31.	B. H. 32.
March .....	32	408
April .....	43	40
May .....	556	274
June .....	651	1,017
July .....	1,688	1,574
August .....	235	371
September .....	2,007	2,319
October .....	2,223	2,301
November .....	855	814
December .....	311	556
	<hr/>	<hr/>
	8,601	9,674
Total, both units.....		18,275



## BATHHOUSE

The American Red Cross leased from the Societe des Eaux of Contrexéville its beautiful bathing establishment, situated on the Colonnade. The arrangement for this bathhouse was perfected by my predecessor, Captain L. E. Hitchcock, and it was opened May 1st. The bathhouse is built of stone, marble and tile. The tubs are part porcelain and part zinc. The Red Cross rented the bathhouse, furnished the coal, soap and towels, and the labor was supplied by the army. One of the best uses to which the bathhouse was put was as a receiving station for the convoys on their arrival. The men were taken directly to the bathhouse from the train, and were bathed before going to the hospitals. All clothing was taken from the men and turned over to the hospital authorities. Each man received at the bathhouse from the army a pair of pajamas, a pair of socks and bathrobe, and from the American Red Cross an empty comfort bag. Many of the soldiers who came here had infested clothing, and by this method of procedure they went to the hospitals clean.

The total number of baths given were as follows:

May .....	3,591
June .....	4,936
July .....	6,576
August .....	6,530
September .....	4,460
October .....	4,820
<hr/>	
Total .....	30,913

In November showers were installed in the bathhouse, because of the fact that during the winter it was impossible to operate the tubs, owing to the exposed condition of the plumbing. The bathhouse was closed during November for a number of days in order to make the change, and conditions have been such that the actual count of baths given have not been possible since that time. My

judgment is that there has been an average of 150 to 200 baths a day given since that time.

#### SORTING AND RECEIVING STATION

In the room rented by the American Red Cross and formerly occupied by the Y. M. C. A. there has been installed a sorting and receiving station for the bathhouse. This was used on several occasions when convoys of patients were received, especially at night. The patients were given a comfortable place to sit while waiting their turn at the bathhouse, before going to the hospitals. Here the doctors examined the field cards of the patients and determined to which hospital each patient was to go. Also, hot coffee was served here.

#### RED CROSS HUT

The American Red Cross hut opened on October 14, 1918. It is 160 feet in length and 30 feet in width. At one end is a sales canteen, behind which are the storeroom, kitchen and office of directress. At the other end is the stage, and back of it are two classrooms and a dressing room. The main hall of the hut is approximately 100 feet by 30 feet in dimension. In the hut the Red Cross has given its Cinema service each week, consisting of a performance on Monday, Tuesday, Wednesday and Saturday evenings. These shows are always crowded and from 650 to 700 men are accommodated. On other evenings of the week performances of other kinds have been given. Some of these have been furnished by the Y. M. C. A., others have come from neighboring hospitals, and still others have been given by the personnel and convalescents of Base Hospitals 31 and 32, in charge of the directress of the hut. One show in particular, a vaudeville performance, including a musical show, was given, and the costumes were designed and made by the women Red Cross hut workers.

There have been three free servings in the hut each week, at which the patients were given either hot coffee





THE RED CROSS HUT



THE NURSES' GARDEN

or chocolate and cakes. Between 500 and 2,000 boys have been served each time.

At the hut there have also been a liberal supply of magazines, newspapers and writing paper.

The Christmas celebration, to which reference is made hereafter in this report, also centered around the American Red Cross hut.

It is impossible to estimate the real value of an activity like the hut. It has furnished a home for the patients in the hospitals and a place for them to spend the afternoon and evening. The hut is beautifully decorated, and has been kept thoroughly clean, and there has been no difficulty in maintaining a wholly satisfactory discipline.

We have operated a sales canteen with supplies purchased from the Quartermasters' Department of the U. S. A. The goods so obtained are sold at actual cost, and no doubt this feature of the hut has been of some advantage, but personally I regard it as the smallest service rendered at the hut.

#### CONVALESCENTS' FARM

The American Red Cross leased and operated a farm of approximately fourteen acres. The work on the farm was in charge of garden officers appointed by the two base hospital units and one non-commissioned officer appointed from each unit. The work was done by the patients in the hospitals who were convalescents to some extent, but were able to do light farm work, and were in such condition that the medical authorities of the hospitals felt that some work would be of advantage to them. It was not hoped or expected that any considerable amount of produce would be obtained from the nine and three-fourths acres which were actually under cultivation. Indeed, the work of planting was commenced somewhat late. There were particularly unfortunate weather conditions, but in the end the actual amount of produce obtained was far better than had been expected. The following figures will show the total number of hours of

convalescent labor and the total produce received from the farm, month by month:

	Hours.	Produce.
May .....	455.....	None
June .....	1135.....	32 doz. radishes
July .....	872½.....	6 hampers lettuce 188 doz. radishes 1¼ bushels of peas 1½ bushels of beans 2 doz. beets
August .....	937.....	6 bushels of peas 3 bushels of beans 13 doz. beets 5 hampers and 4 pounds of lettuce
September .....	No work done..	No produce removed. (Hospitals particularly busy during this month.)
October .....	304.....	278 bushels of potatoes 25 bushels of apples 4 bushels of beets 100 lbs. of lettuce 25 doz. radishes
November .....	106.....	98¾ bushels of potatoes

### THEATER

From May 1st to the middle of October the American Red Cross operated the Grand Casino here. Cinema shows and other entertainments were given in this theater up to the opening of the hut on October 14, 1918. The Casino had a seating capacity of approximately 475 and was a beautifully decorated and appointed showhouse. The impossibility of heating the Casino led to abandonment of its use.

### BARBER SHOP

For a considerable period of time it was almost impossible to procure for the patients in the hospitals necessary shaving materials. It was therefore decided to open a

barber shop in the Salon de Tir near the hut, and this was actually done on the 3rd day of October. The service at the barber shop is entirely free; hot water, razors, shaving soap, shaving brushes, towels, etc., are furnished, and the men are permitted to shave themselves. Also, I arranged for convalescents who were barbers to cut the boys' hair. The following is the record of operation:

	Hair Cuts.	Shaves.	Total.
October .....	875	1,791	2,666
November .....	715	2,762	3,477
December .....	992	3,031	4,023

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Grand total for the three months.....10,166

#### NURSES' CLUB

In the two units there are approximately 175 nurses. While their living quarters are comfortable in the summer time, the buildings in which these quarters are situated are difficult to heat, and there was no place where the nurses could congregate except one small recreation room for each of the units. It was therefore determined to establish a nurses' club, and such a club was opened the latter part of September, with Miss Beryl M. Johnson in charge. There are three living rooms opening into each other downstairs, and the other two floors of the building are used for reading, rest rooms, sewing room, card rooms and recreational features. Each afternoon the nurses are served with tea or chocolate and sandwiches.

#### NURSES' GARDEN

Dr. C. C. Graux of Paris gave to the American Red Cross a beautiful garden for the use of the nurses. The land was about four acres in extent, and was planted with shrubbery, fruit and shade trees. About seventy-five nurses had individual garden plots. Many informal tea parties and other social affairs were given at this garden during the summer.

## OFFICERS' CLUB

An officers' club was opened in November where there are sleeping quarters for five officers, and where there are commodious lounging, reading and smoking rooms. The house is rented from M. Eugene Etienne and the furniture from Dr. Colin.

## SEARCHING AND HOME COMMUNICATION SERVICE

There has been at all times, since March, 1918, in these base hospitals at least two searchers and sometimes three. The general duties performed by the searchers are as follows:

1. Attending each funeral of an American soldier.
2. Writing a letter to the nearest relative of each deceased soldier, called a mortality letter.
3. Making weekly reports on the seriously sick and wounded soldiers in each hospital.
4. Writing letters for the soldiers.
5. Searching for men reported to be missing or dead, among their comrades in the hospitals, to ascertain whether the men reported missing were dead or alive, and if dead to report the details of his death and burial.
6. Social work among the seriously sick in the hospitals.
7. The furnishing of delicacies to the seriously sick.
8. Writing to headquarters of the American Red Cross about a variety of matters for soldiers in the hospitals, including conditions at home, allotments, etc.

It is almost impossible to give an adequate idea of all the things which these women have done. They have rendered exceedingly efficient service, and have worked practically day and night.

## CHRISTMAS PACKAGES

Every soldier who came as a patient to these base hospitals up to approximately November 1, 1918, received from the American Red Cross one of the filled comfort



bags, or Christmas packages, packed by the various chapters in the states.

After November 1, 1918, these packages were not distributed because it had become impossible for us to procure a supply from the warehouse at Neufchateau.

There were, therefore, given out by me and my assistants here substantially 15,850 packages. Many of the patients received here, in fact most of them came to the hospitals absolutely stripped of all personal belongings, without shaving materials, without even toothbrushes, and many of them without any money with which to purchase the same. While these comfort bags and Christmas packages were never standardized as to contents, and notwithstanding the very great variation in their contents, they did furnish to the patients many things of which they were in need. In addition, they made each boy who received one feel that there was some one who had a direct personal interest in his welfare.

I want to emphasize the fact that all comfort bags, all cigarettes, all tobacco, all magazines, and practically all other supplies which have gone to the American soldiers in these base hospitals have been given out directly by a Red Cross representative. Up to the time Lieutenant Layton arrived this work was done by myself, with the assistance of Mrs. Nicholson and Miss Brownlee. While Lieutenant Layton was here the work of distributing in the hospitals was under his personal supervision, and since the arrival of Lieutenant Watkins he has had charge of this distribution. It was never entrusted to any one other than a Red Cross representative.

#### TOBACCO AND CIGARETTES

At Base Hospitals 31 and 32 we have had regular days for the distribution of tobacco and cigarettes, starting on Monday morning and continuing through that day and into Tuesday when the number of patients was large. Each man received each week one package of cigarettes and a package of smoking tobacco, either Bull Durham,

or, if he preferred pipe tobacco, Prince Albert, Tuxedo, Stag. These cigarettes and tobacco were taken directly into the hospitals and delivered to the man personally, or if he was not in the hospital at the time, they were put on his bed for him. There has never been a failure in the supply of tobacco or cigarettes.

#### NEWSPAPERS AND MAGAZINES

Three hundred newspapers are distributed daily by the American Red Cross in the hospitals at Contrexéville.

Each month a magazine distribution has been made in Base Hospitals 31 and 32. For a time these magazines were sent to the Red Cross chaplain, but later the distribution of same was turned over to me, and the following data shows the extent of such distribution:

July .....	2,002
August .....	3,050
September (estimated) .....	3,000
October .....	4,135
November .....	2,449
December .....	3,711
<hr/>	
Total .....	18,347

These magazines were distributed in the various hospitals, aggregating thirteen buildings, in the hut, etc. A preference was given in distributing the magazines to the bed patients.

#### WRITING PAPER

The American Red Cross has distributed a very large quantity of writing paper in these hospitals. At times as many as 20,000 sheets of paper and 10,000 envelopes were distributed weekly.

#### CHRISTMAS CELEBRATION

There were about two thousand convalescents in Base Hospitals 31 and 32 on Christmas day. The Christmas

supplies that were sent here were packed in specially prepared empty comfort bags, each of which has stenciled on it a red cross. These bags contained one pound of candy, one pound of nuts, one pair of socks, two handkerchiefs, a package of cakes, a box of matches, three Christmas cards, two boxes of cigarettes, one package of Bull Durham, one bar of chocolate and one additional Christmas present consisting either of a pipe, a package of playing cards, a razor, toothbrush, or something of similar character.

The hut was beautifully decorated. At one end there was a large star of electric lights beneath which the American flag was draped. At the other end was a large Christmas tree, with about two hundred colored electric lights. The stage was artistically decorated with white and red hangings and two small Christmas trees. There was a profusion of greenery placed throughout the hut. At six o'clock the packages were delivered to the convalescents of Base Hospital 31; at seven o'clock to the convalescents of Base Hospital 32, and at eight o'clock to the personnel of the two units.

There were about two hundred bed patients who were unable to attend the Christmas celebration at the hut. They were given their packages in the hospitals on Christmas morning.

In addition to the bags each man received two oranges, a cigar and a package of chewing gum.

On Christmas day there was a special service at the hut at which each convalescent was given a bowl of hot coffee, a bread and ham sandwich, cakes, candy and nuts.

On the afternoon before Christmas there was a Christmas tree in the Salle Chaude for the French children. Each child was given a little blue bag containing a pound of candy, a pound of nuts and a package of cakes. The women workers had prepared out of cardboard paper dolls representing American soldiers and Red Cross nurses, and each child received one of these, also a toy from the tree and a woolen sweater.

## OFFICE WORK

The office of the American Red Cross from the time its activities started at these base hospitals until July 4th was in a small room in the Villa Salabury. On the last-named date an office with two commodious rooms was opened on the Colonnade. From this point the general business activities of the Red Cross have been conducted. Here checks have been cashed, remittances received for America, stamps sold, etc. The extent of this service so rendered, which has been in charge of Miss May P. Foster, can be understood somewhat from the following figures, which cover a period from August 28, 1918, to January 6, 1919:

Total exchange purchased.....	56,512.33 francs
Money remitted to America, cash—French .....	35,679.60 francs
Money remitted to America, checks .....	8,320.80 francs
Money remitted to America, cash—American ..	926.11 francs
Bills paid .....	27,084.00 francs

Approximately 2,000 francs of stamps have been sold.

The value of this service is further emphasized when attention is called to the fact, first, that there is no bank in Contrexéville where checks of any kind can be cashed; second, that there is no government postoffice where U. S. postal orders can be cashed or purchased, or stamps purchased; third, that almost all the items handled which make up the aggregate figures above were small in amount.

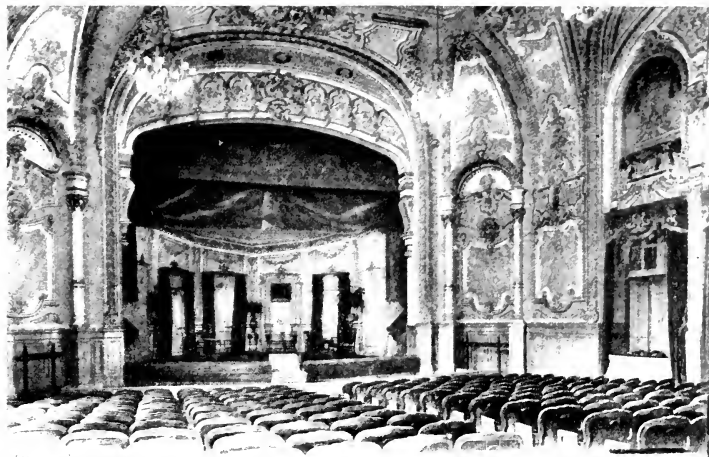
## OFFICE HOURS

The American Red Cross office is open from 8:30 a. m. until noon, and from 1 to 5:30. Also, from 6:30 p. m. until 9:30 or 10 o'clock, and sometimes later.

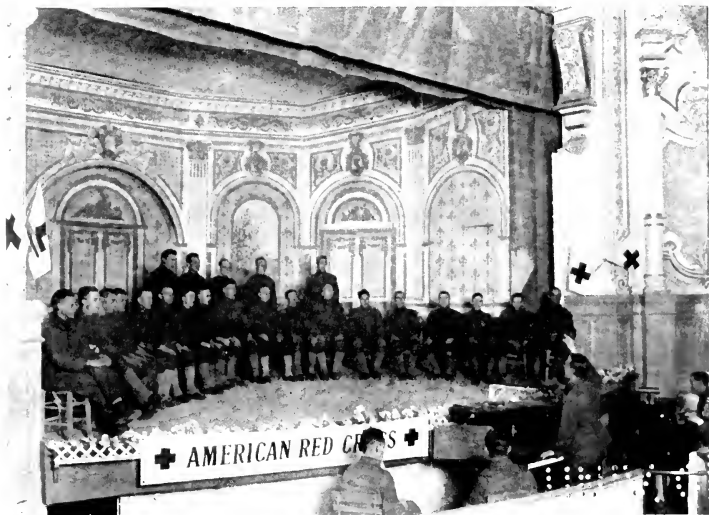
## MISCELLANEOUS

Under this heading may be classed a number of services performed by the American Red Cross here which I will no more than mention in a general way.

1. Furnishing emergency hospital supplies upon requi-



THE CASINO THEATRE



MINSTREL SHOW, BASE HOSPITALS 31 AND 32, JUNE 15 1918



sition signed by the chief surgeon or the section surgeon of S. O. S.

2. Advice on legal matters, including the drafting of wills, contracts, etc.

3. Consultation on matters of all kinds, including financial and family troubles, etc.

4. Furnishing of turkeys at Thanksgiving time to the convalescents in the two hospitals.

5. Loans to soldiers under the plan originated by the A. R. C.

8. The establishing of "sunshine rooms" in several of the hospital buildings.

7. Cashing of checks at Neufchateau where the amounts were too large to be handled out of my revolving fund.

8. Shopping service.

9. Exchanging of mutilated money at the bank at Neufchateau.

#### EMERGENCY SERVICE

There were many times in the hospitals when large numbers of patients were received in a few days. I call attention particularly to the condition in July, 1918, when in the course of four days I distributed, with the assistance of my force, nearly 1,900 comfort bags. There were many times, also, when convoys were received, and when the bathhouse was actually used as a receiving station for two or three days continuously.

9. There were two occasions on which I performed duties away from Contrexéville, as follows:

1. The latter part of April, at the request of Captain Frederick Osborne, I made a trip to Epinal, Belfort and Besancon to report on the necessity for Red Cross work at those places.

2. On November 22, 1918, I left Contrexéville for the purpose of meeting returning American prisoners. My instructions from Captain Furlong were to meet Captain Bancroft at Clearmont and to go with him into territory formerly occupied by the Germans, following the Third

Army until such time as definite information could be procured of some possible point of entry into the American lines of these prisoners, when I was to proceed to that point, also, with instructions to cover the situation at Metz and Strasbourg.

On the evening of November 22nd I did join Captain Bancroft at Clearmont, and on the following morning we proceeded through Verdun and Longuyon to Longwy. There the third corps of the Third Army had taken over a German hospital and was using it to give relief to the American soldiers, nine of whom had been prisoners of war. The officers in charge informed me that when the Americans arrived on the 20th of November the Germans had left a local practitioner in charge, together with the French nurses.

I visited the Americans who had been prisoners of war. They were all wounded, many of them seriously; one man had both legs amputated, another one leg, another five machine gun bullet wounds, and still another a bad wound in the jaw. Among the first things they asked for were American cigarettes, and fortunately we were able to supply these. The names of the men were taken, together with their nearest relatives in America, and this information forwarded to Neufchateau by courier.

At nine o'clock on Sunday morning, November 24th, I left Longwy and went to Luxembough, where I visited the office of the chief surgeon of the Third Army, but was unable to obtain any definite information, and continued to Metz, where on the same afternoon Captain Whitcomb, Mrs. Cothrain and Miss Lynn reported to me.

On the following morning we located 120 American prisoners at the prison camp near Fort Whippy, five kilometers north of Metz. The first thing which was done was to obtain full information as to their names, organizations, physical condition, the address of their next of kin. This data was promptly forwarded to Toul and then to Neufchateau and Paris.

I also found that the American boys had had nothing to eat since their arrival at 4 a. m. that morning, except



what they carried with them, the remnants of the Red Cross packages sent into Germany through Berne, Switzerland. I at once applied to the American officer at Metz and obtained 125 emergency rations. These we took in our camionette to the prison camp, and succeeded in serving mess at 1:30 that afternoon. These emergency rations came in galvanized tin cans. We opened one of these tin cans carefully and used it for serving coffee. Hot water was furnished by the French officials, one boy produced two cans of condensed milk from his Red Cross prison package. There was sugar in the emergency ration, and we had really delicious coffee.

Each boy also received from the American Red Cross two packages of cigarettes, a package of cookies and a bar of chocolate and chewing gum.

Major Verdi, of the U. S. Medical Corps, at my request went to the camp and redressed the wounds that needed attention. He also found a place for two of the more seriously wounded men in a temporary hospital at Metz.

On November 27th twenty-eight American prisoners came to the Hospital St. Clemens, but were evacuated to Toul in ambulances before I reached the hospital, whereupon I wired to the American Red Cross at Toul to meet them and render assistance.

On November 28th twelve American prisoners, who came from Giessen, were located in the station at Metz. These were given a noon Thanksgiving meal, and later in the day five boys, together with the twelve, were given an evening meal. On the afternoon of this day I made an arrangement for the evacuation of all American prisoners then in Metz to Nancy. The original plan was to evacuate the 120 boys, but upon returning to the prison camp I found ten additional prisoners there, making in all 130. The French did not know when these boys would be evacuated, so Lieutenant McCulley, the R. T. O. at Metz, arranged for three cars on the six o'clock evening train to Nancy. After some difficulty I succeeded in obtaining the consent of the French, and marched with the boys, a distance of five kilometers from the prison camp, to the

station. The column was headed by a boy bearing an American flag made from a Red Cross towel in one of the prison camps.

I stayed at Metz until Saturday, November 30th, and from time to time prisoners drifted through the station in small lots. Altogether, the persons under my direction accounted for 190 American prisoners, but twenty-eight of these were not reported on because they were evacuated before they could be reached.

In a general way these boys were furnished by the Red Cross with food, sweaters, cigarettes, tobacco, etc. Also, full information was sent to our Paris office for cabling to America so that their families would be advised of their safe return within the American lines.

On one day we operated a canteen in the railroad station at Metz for arriving prisoners of war and for repatriated residents of Alsace and Lorraine.

I did not go to Strasbourg for the reason that before the situation at Metz had been covered Captain Furlong advised me by wire that there were five members of the American Red Cross at Strasbourg.

Respectfully submitted,  
(Signed) WILLIAM H. THOMPSON,  
Base Hospital Representative.





DETACHMENT INSPECTION



PART OF THE EXLISTED PERSONNEL

### XIII

#### PACKING UP

**I**F in the life of Base Hospital 32 there existed periods of depression, those months, few though they were, between the armistice and the actual start for home, may be truthfully described as acutely depressing.

As was the case in the United States, the armistice was "signed" twice by virtually every one except the signers. In Contrexéville and Vittel, by popular acclamation, and (some say) by order of Colonel Rukke, commanding officer of the Hospital Center, Friday afternoon, November 8th, marked the formal end of hostilities. The Contrexéville band was sent to Vittel in the afternoon to join in the celebration, which consisted of informal, noisy parades, impromptu speeches and general hilarity.

This celebration, it should be noted, was manifest only among the Americans. The crafty French simply shrugged their shoulders and indicated that if the report were true the mayor surely would have been notified officially, and the town crier would be spreading the news.

From that moment until shortly after noon, November 11th, one could hear numerous "reliable" reports that "it's no longer rumor; the armistice actually has been signed now." When the official word did come, Mayor Morel was first to receive it, and he, in turn, communicated it to Colonel Clark, manifesting his delight by the proverbial kiss on either cheek, somewhat to the embarrassment of the latter, as the street was well filled with amused soldiers at the time.

A firing squad of eight men was assembled quickly and provided a presidential salute of twenty-one volleys. For the first time since their arrival in Contrexéville, the

Americans saw a liberal display of French and allied flags, the natives immediately bedecking their homes and public buildings, as well as the thermal establishment and the park, which graced the heart of the village.

In the evening windows which hitherto had been sealed were shorn of their shutters and shone forth such cheer as the French were able to muster after five sad and perilous years. Window sills throughout the town contained small red, white and blue glasses, each with a burning candle, and jack-o-lanterns. One almost sensed the sigh of relief which must have been felt by each resident; a freedom as if just released from prison, though timorous lest the bonds had not been entirely severed. It was a time when sentiment arose in the breast unconsciously; a feeling of pathetic happiness for, and good will toward, the French.

The weeks following the armistice did not begin to drag until all patients had been evacuated and virtually all of the hospital equipment had been sent away. These two facts accomplished, it was indeed tedious to perform only such duties as were necessary to existence while awaiting that magic word which would start the homeward journey.

The only interesting diversion during this period was furnished by the occasional automobile trips to the front. Whenever an ambulance was available parties of six or eight people were organized for a one or two day tour through the neighboring battle sectors. Doremy—the birthplace of Joan of Arc—was another point of interest that many of the personnel were afforded the opportunity of visiting.

Though Thursday, November 28th, was Thanksgiving Day, the turkey “and trimmin’s” did not arrive until December 3rd, when the entire organization was treated

to a dinner which would have been a credit to any hotel cuisine in the United States. Mess halls had been in various of the hospital buildings, but on this occasion all the men were seated at once in a large room which before had served as a ward room in the hospital. The meal consisted of roast turkey and dressing, peas, mashed potatoes, cold slaw, hot biscuits, jam and butter, pumpkin pie, doughnuts and coffee, with a package of cigarettes thrown in for each man. It was a feast long to be remembered.

Christmas Day was the occasion of a similar feast and a large holiday celebration for both the patients and the personnel. Thanks to the efforts of the American Red Cross, December 25, 1918, was a real Christmas. Every one of the more than two thousand patients still in Con-trexéville shared in the Red Cross festivities. For the convalescent patients there was a splendid celebration in the Red Cross Hut. The main hall was beautifully decorated with a profusion of green. A large star of electric lights with the American flag draped beneath adorned one end of the hut, while a huge Christmas tree, brilliantly illuminated and gaily decked, was at the other end. For the patients who were unable to leave their beds, the wards were attractively decorated with evergreens and the Red Cross gifts were distributed at the beds. Every patient received a comfort bag containing one pound of candy, one pound of nuts, a package of cakes, one bar of chocolate, two boxes of cigarettes, one package of smoking tobacco, one box of matches, two handkerchiefs, one pair of socks and either a razor, pipe, toothbrush or some similar article. In addition to this, all of the patients unable to leave their beds received two oranges, cigars and chewing gum.

The task of tearing down the hospital equipment and preparing it for shipment progressed steadily after the

armistice, patients being concentrated into two of the five hospital buildings so that the equipment in the others might be packed and the buildings be cleaned for recommitment to the French. The first of the equipment was shipped in six box cars to Is-sur-Tille on the night of January 10th. Following that, additional cars were sent almost daily until virtually everything in equipment except that necessary to the existence of the unit had been sent away.

The Base Hospital 32 basketball team, organized by the enlisted men and coached by Captain Arthur E. Guedel, proved to be the unit's most successful venture in athletics. On January 4th they defeated Base Hospital 36 by a score of 23 to 5, and a few days later won a hard-fought, overtime game from Base Hospital 31 by a score of 19 to 15. The only team in the Center that succeeded in defeating them was that of Base Hospital 23.

During the last months in Contrexéville there were a great many transfers from the organization, particularly of those officers and men who were serving on temporary duty, or who had been assigned to the hospital as casuals. Captain J. E. Kelley was transferred from 32 on November 13th; Lieutenant Stanley S. Reynolds on November 15th; Captain Eugene B. Mumford on November 30th; Captain H. H. Varner on November 29th; Lieutenant J. V. Sparks on January 2nd; Captains C. W. Banner and Albert Barr on January 5th; Captain H. T. Youtz on January 13th; Lieutenants Van N. Verplanck and Chas. E. Wagner on January 23rd and Lieutenant Francis H. Murray on February 12th.

From December on a number of the older officers were transferred from Base Hospital 32 for return to the United States. These fortunate and much envied individuals were: Major Bernays Kennedy, who was transferred on December 8th; Major Chas. D. Humes and





THE QUARTERMASTER COMMISSARY



THE CARPENTER SHOP



Captain Harry F. Byrnes on January 2nd, and Majors A. B. Graham and Lafayette Page on January 11th. Nurses Martha Berger and Amy Prosser were also returned to the United States on account of illness.

The following nurses, who had expressed a preference to remain in the A. E. F., were transferred on January 13, 1919, and sent into Germany for duty with the Third Army: Olga Anderson, Grace Bell, Viola Burleson, Mary Grim, Birda Hunt, Johanna Montgomery, Florine Ostenzi, Elsie Peacock, Evelyn Potter, Anna Rohr, Ida Scholer and Hermina Wagner.

On January 16, 1918, an order was received at headquarters transferring sixteen nurses to Base Hospital 90. By this time practically every nurse in the unit had her heart set on going home. Most of them were packed up, ready for the return voyage. No names were mentioned in the order and the unpleasant task of selecting the victims finally devolved on the Chief Nurse. It was decided to draw lots. The nurses were called in and the order was read and explained. There was a moment's hesitation. There never had been a time when it was necessary to draw lots or to conscript "32" nurses for any duty, and the volunteer spirit which had characterized the organization from the start did not fail now. One nurse spoke up; then another, and another. The names came faster than they could be written down. The sixteen volunteers who were transferred to Base Hospital 90 were Esther Albright, Hazel Alkire, Dixie Borders, Nellie Davies, Sarah Greenhalgh, Kathryn O. Graber, Mabel Lusk, Alma Lancaster, Bertha Mahan, Clara Need, Agnes Swift, Ruth Totten, Grace Van Evera, Alys Weiten-endorf, Olive Whitlock and Merle Wright.

Efforts were made to have these nurses transferred back to "32" and a few weeks later, all of them with the exception of Esther Albright, Dixie Borders and Alys Weiten-

dorf, who chose to remain in the A. E. F., were returned to the organization.

On January 22, 1919, Lieutenant Colonel Edmund D. Clark, in accordance with orders received at that time, relinquished his command of Base Hospital 32 and was transferred to Angers for return to the United States. Following the transfer of Lieutenant Colonel Clark, Major James F. Clarke, of Unit R, assumed command of the hospital.

It was at about this time also that Lieutenant George Schutte was relieved from duty as quartermaster and transferred to the Vittel Hospital Center. He was succeeded by Lieutenant George Fishback, who had been commissioned in the quartermaster corps on December 19, 1918.

In addition to all of these transfers, there were a number of losses in the enlisted personnel. Cyril A. McLaughlin was transferred on January 9th, and Jay Conaway, who had applied for discharge in France, on January 12th. Otto Asperger, Paul Mulcahy and Edd Hagamann were returned to the United States at different times on account of physical disability. During February practically all of the men who had been assigned to "32" from time to time, and who were not members of the original unit or of Unit R, were transferred to other organizations.

Meanwhile there were a few additions to the personnel. On November 7th Chaplain John M. Lacy was assigned to Base Hospital 32 following the departure of Bishop Francis. Chaplain Lacy served with the organization until January 20th, when he was ordered to Marseilles. Lieutenants Arthur G. Buchler and Howard H. Buehler, D. R. C., were assigned on November 18th and January 15th, respectively, and all of the Unit R officers who had

been transferred or absent on detached service, with the exception of Captain Fuller and Lieutenant Reimers, were returned to Base Hospital 32.

On January 7, 1919, in accordance with orders received from the chief surgeon's office, Base Hospital 32 was officially closed. The three hundred and thirty-six patients still in the hospital, most of whom were convalescent, and had already been classified for return to the United States, were turned over to Base Hospital 31.

The records show that from January, 1918, up until the time the hospital was closed, nine thousand six hundred and ninety-eight patients were cared for at Base Hospital 32. Of these, eight thousand five hundred and six, or approximately eighty-eight per cent, were American; eight hundred and eighty-four were French; one hundred and nineteen, British, and one hundred and eighty-nine, German prisoners of war.

Out of almost ten thousand patients only one hundred and eighteen died—a mortality rate of only 1.22 per cent. Five thousand and sixty-three patients were returned to duty, and the balance evacuated to other hospitals for convalescence.

Statistics compiled in the registrar's office by Lieutenant C. C. Duck showing the monthly admissions and discharges, and the completion of all cases are reproduced on the following pages.

These statistics vary somewhat from the surgical and medical section statistics given in Chapter IX. The variations, however, do not affect the accuracy of the statistics in either case, and are explained by intersectional transfers. It sometimes happened that medical patients were transferred to the surgical section for operation, and similarly surgical patients often developed disease and were transferred to the medical section for treatment.

## ADMISSIONS

Month	Americans	Allies*	Germans	Monthly Totals
January.....	2			2
February.....	7	2 F		9
March.....	407	1 F		408
April.....	40			40
May.....	151	123 F		274
June.....	425	463 F 117 B	12	1017
July.....	1285	289 F		1574
August.....	365	6 F		371
September.....	2290	2 B	27	2319
October.....	2227		74	2301
November.....	749		65	814
December.....	545		11	556
Total for Year...	8493	1003	189	9685
1919				
January.....	13			13
Grand Total...	8506	1003	189	9698

\*F-French; B-British.

## DISCHARGES

To Duty	Americans Trans. to other Hosp.	Died	Allies* to Duty	Germans to Duty	Monthly Totals
2	1				3
12	1	2	2 F		17
269					269
145	6		51 F		202
183	25	1 F	323 F 91 B		623
349	48	6	350 F 26 B	12	791
850	490	2	155 F		1497
263	1407	14	2 F 2 B	27	1715
659	1426	57 6 Ger.		25	2173
386	651	11 9 Ger.		10	1067
687	192	9 1 Ger.		34	923
3805	4247	118	1002	108	9280
83	270			65	418
3888	4517	118	1002	173	9698

\*F-French; B-British.

## RECAPITULATION

*Admissions*

Americans .....	8,506	87.71%
Allies .....	1,003	10.34%
Germans .....	189	1.95%
	<hr/>	
	9,698	

*Completion of Cases*

Americans—		
Transferred to other hospitals..	4,517	46.58%
To duty .....	3,888	40.09%
Allies—		
To duty and transferred.....	1,002	10.33%
Germans—		
To duty and transferred.....	173	1.78%
Deaths—		
Americans .....	101	
French .....	1	
Germans .....	16	
	118	1.22%



## XIV

### "HOMEWARD BOUND"

ABOUT 4 o'clock in the afternoon of Wednesday, February 19, 1919, a telegram was delivered to headquarters in the Providence Hotel which, in the annals of the organization, shall rank next in importance to that which spread the glad tidings that the armistice had been signed. This memorable message decreed that the personnel of the organization—the officers and enlisted men—would entrain for Nantes shortly before 6 o'clock on the following evening; it ordered, also, that the nurses and female civilian employees should leave early in the morning, in company with one officer and one enlisted man, for La Baule, a small resort on the west coast of France in the vicinity of St. Nazaire.

In spite of the fact that the organization had been working at top speed for some weeks to be ready when the word arrived to start for home, members of the unit found themselves faced with the tremendous task of packing and loading baggage, policing quarters, getting the nurses on their way, and winding up other official business all within a twenty-four-hour period.

The remainder of the short evening of February 19th held forth no rest; it heard not the plaintive peal of taps; it witnessed little or no military courtesy; it saw few lights extinguished ere the small hours of the morning. All fell to their assigned and personal tasks of preparation with the vim which had been exemplified in times of the more serious battles of the war, when trainloads of wrecked humanity had been sent on for tender and efficient care.

Together with Captain McGuire and Sergeant Lukens,

the nurses and civilian employes were started on their way early in the morning, leaving the remainder of the organization, as it proved to be, "for keeps."

After their departure, Contrexéville witnessed a day as busy as any had been during the war, so that by the time the train was boarded members of the organization were desperately tired, but exceedingly happy. That part of the freight train allotted to the unit consisted of one third-class coach for officers, five for enlisted men, and three box cars for baggage and kitchen. The kitchen car required considerable preparation to adapt it to service. Under the direction of Lieutenant Callis a regulation army field kitchen was installed in one end and surrounded with a foot of sand to provide insulation. A week's supply of rations, together with the mess gear and sufficient wood for fuel, were loaded in the other end. The headquarters office was located in a French mail car, which served excellently for office purposes.

Just a few hours prior to the departure of the train a telegram was received relieving Lieutenant Reel from further duty with the hospital and transferring him elsewhere for discharge in France. This order came in response to an application for discharge which Lieutenant Reel had filed some time before in order that he might accept a position which had been offered him in the Paris offices of a well-known American firm. Succeeding Lieutenant Reel, Lieutenant Duck was appointed detachment commander.

Contrexéville's limited population was pretty well represented at the station when the train pulled out, amidst shouting and whistling from within as well as without the cars. Despite the fact that every member of the organization was as eager as possible to be on the way, actually living those magic words which hitherto had been so reverently spoken—"homeward bound"—it was





LALLEMONT'S



CAFE DE LA GARE

not without some pangs of regret that the last goodbye was waved and shouted. It could not have been otherwise. Human nature requires a certain tie of friendship after sixteen months of constant association.

The fact that the train to which the special cars were attached was a freight train may or may not mean much, if left to stand without explanation that French passenger trains are notoriously slow and freight trains are operated in proportion. Consequently, the train established no speed records during the evening, and daylight found the section detached from anything movable in the yards at Chalindrey, which, after all is said and done, is only some fifty or sixty miles from Contrexéville. Efforts were made throughout the morning to have the cars attached to something west bound, and finally about 2 p. m. connection was made with a snail-like freight train which crept along throughout the afternoon, hardly exceeding walking speed at any time.

Short stops were made in Langres and Chaumont, the latter being reached about dusk. After having passed Chaumont the train made a little better speed, and within a reasonably short time Bar-Sur-Aube was reached, where the cars were again placed on a side track. This time, however, the delay was not without its compensation, for facilities were at hand for washing, and poilus were present with the famous vin rouge at bargain day prices. An evening meal was served alongside the train, and within two hours after the stop the cars had been attached to another train which wound up in the railroad yards just outside Brienne-le-Chateau about 11:30 at night.

Protests against further delay, which were placed at a near-by roundhouse after the cars had been sidetracked and the engine "put to bed," fell on deaf ears, so the night of February 21st was spent in the yards.

Early morning brought encouragement when an engine

took hold and started off with the train on a trip which proved to be the shortest of the journey, as it terminated in the station at Brienne-le-Chateau. The engine left, and that was that. Pitiful pleas, cigarettes and tobacco in large quantities, promises of everlasting friendship and even five hundred francs failed to obtain from the *chef-de-gare* an engine with which to proceed, though he was "exceedingly sorry and equally helpless in the matter." The only encouragement he could lend was that maybe the cars might be moved about noon. It was about eight o'clock in the morning when this cheerful information was received.

Although it was late in the afternoon before the train left, the long day was not without its compensations in Brienne-le-Chateau. As the name of the town would suggest, a beautiful chateau stands on a hilltop, commanding a view which is equalled only in other parts of France. Not far from the chateau exists a school which Napoleon attended as a boy. A bronze tablet with a bas-relief of the great leader adorns one post at the entrance and bears this inscription: "Brienne-le-Chateau is the place I call home. It was here I first got my ideas of the man."

The noon meal was served on the freight loading platform at the station shortly after members of the organization under Lieutenant Duck, as detachment commander, had visited the chateau and school. The early part of the afternoon found a certain amount of unrest in the ranks, which was dissipated somewhat upon the arrival of an Italian troop train which stopped alongside. Fraternization followed immediately, and within a short time after their arrival the newcomers had called forth their band. Souvenirs were exchanged hastily, and after a halt of about thirty minutes the Italians left.

Traveling under such abnormal conditions, and in a constant state of uncertainty made meal times distress-

ingly irregular. As a matter of fact it became necessary to ask the engineer of the train at each stop whether he would remain stationary long enough to serve such rations as could be hurriedly prepared. However, after having remained in Brienne all day, little fear was felt that there would not be plenty of time for an evening meal somewhere along the way. The train finally started about four o'clock. It was known that the route was through Troyes, and the mess detail prepared to serve at that station. Troyes, however, as matters developed, "meant nothing in our young lives" in so far as food entered the discussion, because the stop did not exceed five minutes, nor, what was worse, did the train stop again until it pulled into the yards at Sens about 11:30 p. m., after most of the men had "turned in" for the night. All were aroused, however, and many partook of the delayed evening meal.

Once more the cars were detached and left in the yards all night, but the departure the next morning came without much delay, at about eight o'clock. Shortly before noon the train pulled into the station at Montargis, where half an hour was allotted for lunch, after which the more or less snail-like speed was resumed until the station at Orleans was reached early in the afternoon. About five o'clock an American train crew with one of the enormous American engines, which had been sent from the United States, connected with the train, and from that time until about 11:30 at night considerably more speed was exhibited than during any stretch of the journey.

The resting place for the night of February 23rd was in the enormous yards at St. Pierre-des-Corps, a suburb of Tours, American Headquarters, S. O. S. Proximity to headquarters may have had something to do with it; prayers for more speed may have been answered, or still other influences may have been at work, but at all odds

the start from St. Pierre was made about three o'clock in the morning and daylight found the train in the sheds at Saumur for a short stop. Breakfast was served in the railroad yards at Angers about 8:30, and from that time until noon a steady speed was maintained, no stop being made until the destination—Nantes—was reached.

There it became known that a four-mile hike with full packs was imminent, the object being St. Sebastien, a suburb of Nantes, where it was supposed a stop of a few days would be made prior to passing on to St. Nazaire for passage back to "God's country."

The afternoon was spent in locating billets in old houses, in barns, over stores, above garages and in other vacant spaces which were sufficiently large to accommodate a few men, on the floor. A detail in charge of Captain Moore had preceded the organization, having left on the morning of February 20th by passenger train, in order properly to assign billets. Therefore little confusion resulted when the organization arrived.

The first few days in St. Sebastien were fraught with wild rumors as to the possibility of moving toward home; likewise were they productive of a vast amount of work for a certain portion of the organization in preparing for the examinations which had to be passed before permission to continue the homeward journey would be forthcoming. Here again rumors ran rampant; the most severe officers in the army conducted the examinations; the penalties for the slightest failure to pass an examination were terrible, entailing an additional residence in St. Sebastien of not less than three weeks; some organizations even had been sent back to Germany for further service because of their actions in the billeting areas. All these and more were subjects of common conversation.

One bright spot in all these gloomy speculations was



the discovery that Lieutenant Ray Randall of Indianapolis was on duty in the headquarters office of the Nantes area as embarkation adjutant. Lieutenant Randall had many friends in 32's personnel, and assisted the organization materially in the preparation for the final inspections and the vast quantity of paper work required before their departure.

The arrival in St. Sebastien was on Monday, February 24th. On the following day it became known definitely that the nurses and civilian employees would not rejoin the balance of the unit. Word was received to send their baggage on to St. Nazaire, from which port it was thought that they would probably sail within a few days. On March 2nd, however, the nurses received orders to proceed to Brest, and here they boarded the U. S. Transport *America*, and sailed for the United States on March 4th. Nine days later, on March 13th, they arrived in New York and reported at the Nurses Demobilization Station, Hotel Albert, and from here received transportation to their respective homes. Owing to lack of room on the *America*, the following nurses remained at La Baule and later returned to the United States on the S. S. *Louisville*, arriving in New York March 22nd: Golda F. Smith, Agnes Swift, Elsie Thompson, Helen A. Thompson, Addie Threlkeld, Ruth Totten, Eva B. VanDyke, Grace Van Evera, Bessie Whitaker, Olive Whitlock, Merl Moss Wright and Gertrude Steffen (civilian employee).

Meanwhile the first few days at St. Sebastien were spent in preparation for the examinations, which consisted of inspection of all paper work and of the equipment and physical condition of the personnel. The men not occupied constantly in preparatory work spent their time drilling because it became known that certain drill work would be called for along with the equipment exam-

ination. On Tuesday, March 4th, promotions came for several of the officers, including Major James F. Clarke, to be lieutenant-colonel; Captain Gray to be major, and Lieutenants Frank Walker, Beeler, Ricketts, Crow, Wehman, A. G. Buehler and H. H. Buehler to be captains. It was on the same date that Lieutenant Colonel Clarke reported the organization as being ready for examination, and answer was received that the equipment inspection would be held Thursday.

Few beehives or anthills have seen more activity in a twenty-four-hour period than that which was exhibited in St. Sebastien on Wednesday, so that by the time the men went to their bunks at night the town was in perfect order.

The next morning—the fearful one—dawned on a spick and span organization of Uncle Sam's men, the peers of whom probably did not exist in the A. E. F. The inspecting officers came, conducted their business in an orderly manner, and left with the statements that the organization was one of the best they had inspected since having been assigned to that duty by headquarters at Nantes.

The afternoon of that day saw the following officers promoted: Captain Meyer to be major, and Lieutenants Hurt, Funkhouser, E. E. Johnston, Quimby, Hitz and D. S. Walker to be captains.

The night's sleep was broken for some when Walker Marshall fell from his billet on the second floor of a barn to the hard cobblestone street below and was left stunned. It was a matter of several weeks before all the "kinks" were overcome.

Friday saw the paper work inspected and passed, leaving only the physical tests between the unit and departure for St. Nazaire, so once more "open season" was proclaimed for rumors. That day chanced to be March 7th.

It was April 9th when the journey onward was continued, leaving a full month, during which time weighed very heavily, as the only possible anticipations were those of continuing the trip. Only occasional long hikes through the surrounding country and trips into Nantes, where an excellent opera could be heard almost any evening, broke the strain of impatient waiting. A canteen offering a liberal assortment of candy, cigarettes and "Lu-Lu Biscuits" was established by "Red" Jackson and did a flourishing business.

Comrades who had been hard by in Contrexéville for many months—members of Base Hospital 31 of Youngstown, Ohio—once more became comrades on Sunday, March 16th, when their train pulled into Nantes after the tedious trip from Contrexéville. They too were billeted in St. Sebastien.

Sad news broke into camp on the following Sunday, March 23rd, when word was received from Nantes that "Dad" Bryant, a cook with the organization, had been found dead on the street the preceding day. Bryant, past middle age, had served with a line organization, but was sent to the hospital for treatment after some time at the front, where doctors said his constitution could not stand the strain. Upon reaching the convalescent state, he soon proved himself to be a good cook, so the red tape was started in an effort to effect his transfer to the organization, which ultimately was brought about.

Thursday, April 3rd, saw a track and field meet in St. Sebastien, the participating organizations being Base Hospitals 32, 41 and 45, Mobile Hospital 1 and Evacuation Hospital 1, the members of 32 winning the meet in a fairly easy manner.

On the same day word was received that all of the officers would leave the following morning for St. Na-

zaire to board a homeward-bound ship, with the exception of Major Gray, Captains Hitz and Quimby, Lieutenants Callis and Fishback, whose fates it was thought at the time were definitely sealed with those of the men. The officers who left for St. Nazaire at this time were Lieutenant Colonels J. F. Clarke and H. J. Whitacre, Majors J. F. Herrick and A. H. Meyer, Captains J. W. Ricketts, E. E. Johnston, E. H. Buehler, E. Funkhouser, F. C. Walker, D. S. Walker, L. D. James, A. G. Buehler, P. T. Hurt, I. N. Crow, E. J. Wehman and R. C. Beeler and Lieutenants F. R. Mehler, K. L. Johnston and C. C. Duck. The following day these officers boarded the U. S. S. *Zeelandia*, sailing from St. Nazaire on April 5th and arriving at Charleston, S. C., April 17th. From here they proceeded to Camp Jackson, Columbia, S. C., where a few of them were discharged and others received transportation to discharge camps nearest their respective homes.

On April 8th, five days after the departure of these officers from St. Sebastien, the discouraged and impatient remnants of 32, now under the command of Major Gray, received the following order:

SERVICES OF SUPPLY  
HEADQUARTERS U. S. TROOPS, NANTES  
BASE SECTION No. 1

Special Orders

April 8, 1919.

No. 99

Extract.

2. Pursuant to telegraphic instructions (47-G1-B) Headquarters, Base Section No. 1, dated April 8, 1919, the following-named organizations:

\*            \*            \*            \*            \*

Base Hospital No. 32—St. Sebastien—5 officers and 136 enlisted men,

\*            \*            \*            \*            \*

will proceed from stations set opposite their organizations, on April 9, 1919, to St. Nazaire, Loire Inf., reporting upon arrival to the



DETAIL. INSTALLING TANK AT GARAGE



"BAKING" IN THE GLASS HOUSE



Commanding Officer, Embarkation Camp, for return to the United States, on the first available transports.

The R. T. O. will furnish the necessary transportation.

The journey directed is necessary in the public service.

By order of Colonel Knudsen.

Official:

J. F. STEVENS,

Adjutant.

CLARK P. CHANDLER,

Chief of Staff.

In anticipation of these glad tidings, the "house had been put in order," so that little was left to be done the next morning other than to roll packs and "police" billets, which was accomplished in "jig time."

The start from the station at Nantes was made at two o'clock in the afternoon of April 9th, and the train arrived in St. Nazaire about five o'clock. The members of the organization were conducted to what was known as Embarkation Camp No. 2 and set down in the midst of thousands of others whose eyes focused clearly in one direction only—the west—which at that time was synonymous with home.

Early next morning found the men taking the chief role in what was more or less affectionately termed a "three-ring circus," but which in fact was another examination—physical this time. The name was occasioned by the manner in which the examination was conducted within the walls of a large building with various stalls, fenced areas, aisles and other mazes. It required some fifteen minutes to complete the examination of approximately 180 men from head to foot. In soldiers' terms, it was "very snappy."

Glad tidings were received immediately after the examination, when a detail of sixty men was called for duty all day as kitchen police at the general mess hall where thousands were fed at each meal. No soldier went to any assigned task grumbling, but in truth it must be said that

the sixty "lucky" men did not fall to this job in any spirit of careless abandon. They did the work nobly, however; so nobly that a note was sent to the commanding officer saying it was the best detail that had served in the kitchen at any time since the camp had been opened.

The glory of the commendatory note was dampened somewhat the next morning when a request came for an additional sixty men to serve for the second day. Fortunately for the men, however, word was received soon after to the effect that the unit would move at three o'clock in the afternoon to Camp No. 1, which was one step nearer home. The move was made on schedule time, and the men went through the second "three-ring circus" in as many days, this trip being through the delousing plant, where, in addition to eradicating the pests, if they existed, a competent system of wrinkling and shrinking clothes in their delousing process had been devised.

Word was received from the camp adjutant in the evening of that day, April 11th, that the entire enlisted personnel of the unit, together with two officers, would board the U. S. S. *Freedom* on April 13th and start the return ocean journey. The two officers selected were Major Gray and Captain Hitz, which left Captain Quimby and Lieutenants Callis and Fishback as casuals.

During the seven weeks that Base Hospital 32 had spent in the embarkation area there were a number of changes in personnel in addition to those already mentioned. On March 7th Captain Robert M. Moore was transferred to the embarkation center at LeMans for duty. Other transfers, resulting in most cases from application for discharge in France, caused the following names to be dropped from the sailing lists: Jay B. McElwayne, John McArdle, William N. McClure and Winters Fehr.

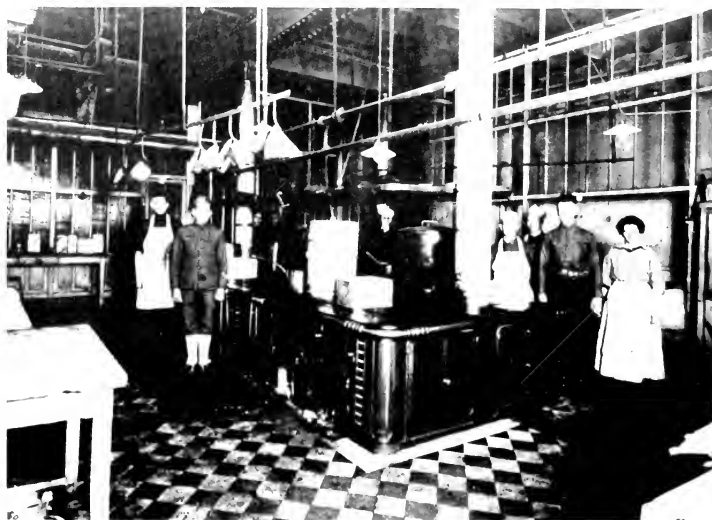
The sailing lists as finally approved contained the







FIRST ÉTAGE, HOSPITAL A



KITCHEN, HOSPITAL A

names of two officers and 179 enlisted men, of whom 130 were members of the original unit of Base Hospital 32 and forty-nine of Unit R.

Saturday, April 12th, found the men passing what proved to be their last inspection of any kind in France, when in the morning they laid out their packs before the examining officers.

Early on the morning of Sunday, April 13th, the men lined up on the rain-soaked parade grounds, and shortly after daybreak started on the two-mile march to the docks. It was raining, but for all that it was about the brightest, sunniest day in 32's history, and the men filed up the gang-plank wet but happy with the knowledge that the long-awaited sailing orders had finally come true. At about noon the *Freedom* cast off and amid the cheers and songs of those on board pulled slowly out to sea.

The *Freedom*, a small German freighter of doubtful seaworthiness, which had recently been converted into a transport, was built along the general lines of a toothpick. What she lacked in beam she made up in length. Whether or not this peculiar construction was responsible for her even more peculiar actions at sea is not known. She had a sickening habit of rolling from one side to the other with the regularity of a pendulum. Rough weather or calm mattered little. The *Freedom* rolled on through the smoothest seas, giving a perfect imitation of a floundering ship battling with the after swell of a hurricane.

Inquiry among the crew developed that the *Freedom* was rated as a "ten-day" boat, but this was her maiden voyage as a transport, and her time was largely a matter of speculation. In addition to her crew, the *Freedom* accommodated twenty-seven officers and some twelve hundred men. Among the other organizations on board were

Base Hospital 25 of Cincinnati, Base Hospital 19 of Rochester and Base Hospital 17 of Detroit.

Captain Ray L. Huff of Parnassus, Pa., commanding officer of the First Trench Mortar Battery, was military commander of the boat and Colonel L. D. Carter was chief medical officer.

Except for the "abandon ship" drills—grim reminders of the days on the *George Washington*—there was little to suggest the former voyage. Port-holes were opened wide, lights were unveiled, and the men smoked on deck after dark at their pleasure. The ship's course and location, instead of being the dark secret that it was on the former voyage, was posted daily in the officers' dining room, and crowds of homesick passengers marked the progress and measured the distance still to be covered.

Fatigue clothes were issued to the men to protect their regulation uniforms. Sleeping quarters were policed daily, and frequent physical inspections served to kill time if nothing more. A boxing match was staged on the well deck one evening, and one morning a school of whales, blowing and splashing not far from the ship, provided a novel but brief entertainment.

For the most part, however, the voyage was uneventful and tiresome. With the *Freedom* a week out of St. Nazaire and still not half across, it became apparent that she lacked a good deal of being a ten-day boat. Rough weather had slowed her up in the Bay of Biscay, but even in a calm sea she seemed to fairly creep along. The days dragged by. The ship's canteen ran out of everything desirable, as ship's canteens have a habit of doing. The mess deteriorated. The U. S. S. *Leviathan* which, eastward bound to Brest, had passed the *Freedom* on the second day out, passed her again on the twelfth day westward bound. Frantic cries from the *Freedom* to "throw

us a line" and "give us a tow" fell on deaf ears, and the *Leviathan* steamed on, and was a mere speck on the western horizon in less than an hour.

Saturday, April 26th, the thirteenth day out from St. Nazaire, marked the beginning of the last lap of the homeward voyage. The chart on the bulletin board showed the *Freedom* a scant forty-eight hours from shore, and it was definitely announced for the first time that the port of debarkation would be New York. Heretofore the *Freedom's* destination had been a matter of speculation depending entirely upon wireless instructions to be received as the ship approached the United States.

On Sunday, April 27th, hopes and anticipations ran high. A number of wireless messages were delivered from waiting relatives and friends. Orders and instructions were issued in regard to debarkation, and the order in which the different organizations would debark was announced. Fatigue clothes were turned back to the ship, and the men donned their regulation uniforms. It was no mere rumor. The *Freedom* was due into port at an early hour the following morning, Monday, April 28th, the fifteenth day out of St. Nazaire.

Dawn found everybody up, with the *Freedom* just outside the harbor. Then, through lifting mists a kaleidoscopic panorama that will never be forgotten—the Statue of Liberty, a sky line of majestic buildings, battleships and fantastically camouflaged steamers. There was a short delay while quarantine officials boarded the boat, and then the *Freedom*, amid cheers and music and the incessant tooting of a hundred whistles, threaded her way into port and docked on the Brooklyn side.

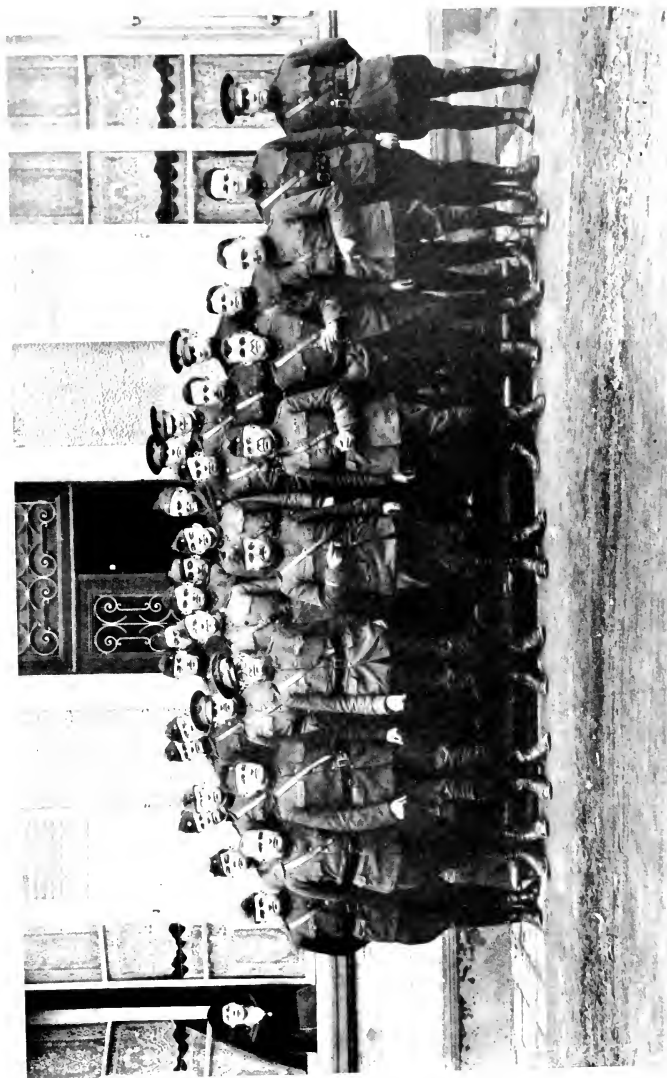
By ten o'clock the personnel of Base Hospital 32 was off the *Freedom*, and by noon the baggage was unloaded and sorted up on the pier. Scarcely a block away a recep-

tion committee of the Base Hospital 32 Auxiliary Association and a little group of relatives and friends waited in the hope of gaining access to the pier. But they might just as well have stayed in New York. A dozen guards offered an impregnable barrier in either direction. Bribes, threats and persuasion availed nothing. No one left the pier and no one entered it. A few notes and messages were exchanged, but that was all.

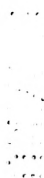
Lunch was served on the dock, and the time dragged by. As accustomed as the unit was to delays, they found this wait on the pier the most trying of all. It was almost five o'clock when the ferry finally appeared and the men filed on. A few minutes later they were on the other side, where, after another brief delay and an excellent supper served "on the run" by the Red Cross, they boarded an electric train for Camp Mills. Here they were met by guides and marched to the tents assigned them.

Four days were spent at Camp Mills with little to take up the time except the usual physical examinations and a few exchanges and replacements of clothing at the quartermaster depot. On Friday, May 2nd, Major Gray, Captain Hitz and all of the remaining enlisted men of the original unit were transferred to Camp Merrit, New Jersey, leaving behind the forty-nine enlisted men of Unit R—then known as the Camp Dodge detachment of Base Hospital 32.

On Monday, May 5th, after three days at Camp Merritt, Base Hospital 32 boarded a train for Camp Zachary Taylor with the 150th Field Artillery under the command of Colonel Robert Tyndall of Indianapolis. The train was routed over the New York Central Lines to Indianapolis, where it was to arrive on May 7th and remain all day, allowing the organization to participate in the Victory parade, a feature of the Indianapolis home-



OFFICERS OF BASE HOSPITAL 32, JANUARY, 1919





coming celebration. The arrival at Indianapolis on the morning of the 7th marked another day that will live long in the memory of "32." Seventeen months had passed since their departure from Fort Harrison, December 1, 1917, and to most of the men Indianapolis meant "home." Familiar stations where newsboys called the *Indianapolis Star* marked the train's approach to the city. Then the suburbs, and Indianapolis—Brightwood, Massachusetts Avenue, and a glimpse of the monument standing out against an old familiar skyline.

It was about nine o'clock when the train pulled in and stopped west of the Union Station. Here, after a brief delay "32" detrained and marched directly to Military Park, where crowds of relatives and friends, and many of the "32" officers were gathered to meet them. Luncheon and refreshments were distributed freely. Nobody's money was good. Little groups of reunited families chatted gayly; old friends greeted one another after months of separation. Two hours passed quickly and then the parade began to form.

Delay followed delay, but the parade finally started. Indianapolis was in gala attire for the celebration. A thousand flags marked the line of march and enthusiastic crowds lined the streets—east on Washington to Alabama, back to Meridian, up Meridian to the monument, through the flower-strewn victory arch and around the Circle, then north and east to Delaware Street, out Delaware to Sixteenth, west to Meridian and south again to the Circle. It was late afternoon when the parade reached Washington Street again and "32" marched directly to the waiting train.

About nine o'clock that night the train pulled into Camp Taylor, and the following morning the business of getting out of the army began. Thursday and Friday

were spent in checking the organization records and turning them in to the camp authorities, together with all of the remaining organization equipment. Meanwhile the members of the unit were occupied with physical examinations, lectures, and the signing of an endless variety of papers, all necessary to comply with the requirements of discharge. Individual equipment in excess of the items of uniform allowed each man upon leaving the service were taken up by the camp quartermaster, and the men received their final pay, together with the authorized bonus, and transportation to their homes.

On Saturday, May 10, 1919, every member of the unit was honorably discharged, and Base Hospital 32 ceased to exist.

Two days later the forty-nine enlisted men of Hospital Unit R were discharged at Camp Dodge. With the transfer of Base Hospital No. 32 under the command of Major Gray to Camp Merritt, these men, known then as Camp Dodge Detachment of Base Hospital No. 32, were left at Camp Mills.

They remained there for ten days with nothing to do but go sightseeing in New York, and then on May 9th boarded a train with 300 other troops under the command of Second Lieutenant C. D. Kaslen of Huron, S. D., and left at seven o'clock that evening for Des Moines. The next morning about ten o'clock the train arrived at Niagara Falls. Three hours were spent there, and then, speeding through a section of Canada, Detroit was reached at eight o'clock that night. Coming into Chicago the next morning the train was switched from the Wabash and Grand Trunk tracks to the Rock Island, and the last lap of the trip was begun.

At three o'clock on what seemed to them to be the most beautiful of all Iowa Sunday afternoons, the men of Hos-





WINTER SCENE NEAR CONTRENVILLE



BUNDLING FAGOTS

pital Unit R crossed over the Mississippi singing, "Iowa, My Iowa." It was the first vision of their beloved state in eighteen months, and a very different vision than they had when they left Fairfield in a blinding snowstorm two winters before.

At eight o'clock they reached Des Moines and two hours later were installed at Camp Dodge. By 6 p. m. the next day, Monday, May 12, 1919, all the members had been discharged from the service and were on the way to their homes in the southeastern corner of Iowa.

## XV

### THE AUXILIARY ASSOCIATION

TWO weeks after the departure of Base Hospital 32 from Fort Benjamin Harrison a letter signed by Richard O. Johnson, the father of Richard K. Johnson, a member of the unit, was sent to the near relatives of the officers, nurses, enlisted men and civilian employees, suggesting the advisability of organizing an auxiliary association to provide gifts and comforts for the unit. Mr. Johnson urged all who might be interested to attend a meeting in the Palm Room of the Claypool Hotel on December 18.

His suggestion met with an immediate and enthusiastic response. More than three hundred relatives and friends of members of the unit were present at the meeting, where Mr. Johnson was nominated as permanent chairman of the association, and an organization committee composed of the following persons was appointed: J. K. Lilly, W. P. Herod, Benjamin F. Hitz, Charles B. Maugham, Cass Connaway, Mrs. Edward J. O'Reilly, Mrs. P. E. McCown and Mrs. E. B. Mumford.

The organization adopted the name: Auxiliary Association of Base Hospital 32, and Mr. Johnson, the president, through correspondence with Surgeon General William C. Gorgas, secured the official endorsement of the Medical Department of the U. S. Army for the association. The following cablegram was sent to the unit shortly after the first meeting: "Your home auxiliary, composed of relatives and friends, officered and organizing with prospective membership of several hundred, greets you, your officers and members of unit. Advise us at once of any funds or material required, or any services we can render now or at any time. We are in with you to the finish."

The officers of the association, in addition to Mr. Johnson, were: Charles B. Maugham, secretary; Benjamin F. Hitz, treasurer; Rev. Lewis Brown, chaplain, and Mrs. Benjamin D. Hitz, corresponding secretary.

The executive committee, of which Mr. Johnson was chairman, was composed of the officers and J. K. Lilly, Dr. O. G. Pfaff, W. P. Herod, Cass Connaway, J. B. Giles, Mrs. H. R. Beery, Mrs. E. D. Clark, Mrs. Bernays Kennedy, Miss Margaret McCulloch, Mrs. E. B. Mumford, Miss Ruth Maxwell, Mrs. P. E. McCown, Mrs. Edward Dean, Mrs. E. J. O'Reilly and John F. Russell.

Mr. Johnson was chairman of the finance committee, Mr. Benjamin F. Hitz of the transportation committee, Mr. Charles B. Maugham of the publicity committee, Dr. O. G. Pfaff of the medical advisory committee, Rev. Lewis Brown of the home relief advisory committee, Mr. Cass Connaway of the legal advisory committee, Mr. Wm. Pirtle Herod of the information and communication committee and Miss Margaret Gerin of the nurses advisory committee.

Mrs. Bernays Kennedy was elected general chairman of twenty comfort committees headed by the following women: Mrs. A. B. Graham, Mrs. C. D. Humes, Mrs. E. B. Mumford, Miss Ruth Maxwell, Mrs. G. L. Sparks, Mrs. Cass Connaway, Mrs. A. E. Sanagan, Mrs. H. A. Porter, Miss G. F. McHugh, Mrs. E. H. Dean, Mrs. E. J. O'Reilly, Mrs. J. R. Maugham, Mrs. T. O. Callis, Mrs. B. F. Hitz, Mrs. R. C. Beeler, Mrs. P. T. Hurt, Mrs. W. Baldwin, Mrs. Steffen and Mrs. R. O. Johnson.

Headquarters for the comfort committee were opened at 45 Monument Circle, over the Circle Flower Store, and here supplies of wool for socks were given out, finished articles turned in, boxes packed and meetings held. Mrs. P. E. McCown became chairman of the supplies and packing committee.

In January the auxiliary association ordered fifty boxes of apples shipped from New York to the base hospital. Early in May a letter was received from Major H. H. Van Kirk, commanding officer of Base Hospital 32, acknowledging the receipt of the apples, which had arrived in excellent condition and were much appreciated.

The membership fee for the auxiliary association was fixed at \$5.00 a year and membership blanks were mailed to all those who were likely to be interested. The response was encouraging, and in the course of three months more than two hundred members were enrolled.

The Brunswick Shop very kindly donated a phonograph and a number of records to the base hospital, and through the co-operation of the auxiliary association these articles were shipped to the unit and proved a very welcome gift.

A large quantity of yarn for socks was purchased by the auxiliary association with funds from the treasury and was distributed by the comfort committees to be knitted. During the winter 425 pairs of wool socks, a number of bright-colored knitted afghans, several bed quilts and pillows and a comfort kit for each nurse in the unit were collected and packed. Various difficulties with government shipping regulations delayed the shipment of these articles, but they were sent late in the spring and received by the unit in the summer.

The comfort committee attended to the making, packing and shipping of gray sleeveless sweaters for the nurses to wear over their uniforms. These sweaters formed the last shipment to Base Hospital 32 made by the auxiliary association, for with the signing of the armistice on November 11 the activities of the association ceased. Various articles collected after the shipment of nurses' sweaters—handkerchiefs, socks, afghans and other things—were



turned over to the Near East Relief Fund, according to the decision of the executive committee.

The following is a list of the members of the Auxiliary Association of Base Hospital 32:

Mrs. Anna Alkire, Gertrude F. Allen, Joel E. Allen, Mrs. Neff Ashworth, George F. Asperger, William H. Avant;

Mrs. W. H. Baker, Mrs. Wilbur Baldwin, Mrs. H. Power Ball, John H. Bechtel, Mrs. Raymond C. Beeler, Mrs. Harry R. Beery, Mrs. Bruce Bendley, Albert Berg, Mrs. L. W. Berry, Iradell Bean, Dr. R. J. Blakeman, Walter Bonner, H. L. Blumenthal, Mrs. C. S. Bradley, Rev. Lewis Brown, Geo. A. Bittler, Helen T. Brosnan, James G. Brosnan, Myrtle Brooks, Orilla Borders, Helen Burdette, Mrs. Mary D. Byrnes;

Annie Calley, Mrs. T. O. Callis, Mrs. Margaret Carroll, Margaret Cassidy, Mrs. Alice M. Cathcart, E. L. Cline, Mrs. Mayme Beeler Combs, Cass Connaway, Mrs. J. L. Cooke, John L. Cooke, Charles M. Cooper, Mrs. Nellie Corrigan, Mary E. Corrigan, Mrs. Benjamin Cotharin, L. A. Cox;

Mrs. Mary Drozdowitz, Mrs. Mary E. Delaney, Hugh J. Davey, Mrs. A. N. Daugherty, Mr. and Mrs. Edward H. Dean, Belle Noble Dean, Rosamond H. Drake, Frank Drake, Mrs. O. C. Dunn;

C. E. Erdmann & Son, Will V. Erdmann, Mrs. Will Erdmann, Mrs. Lewis Essig, Mrs. B. E. Ernest, Mrs. Scott R. Edwards, Dr. and Mrs. J. H. Eberwein;

John P. Frenzel, Jr., Frenzel Bros., Mrs. J. A. Finlay, J. O. Finlay, Mrs. William Fickenger, Mrs. Otto L. Friend, Edith W. Fehr, Louise M. Fehr, Mrs. H. R. Fitton, Feltman Shoe Company, Mrs. Fletcher;

Mrs. A. B. Graham, Margaret L. Gerin, J. B. Giles, Mrs. John L. Griffith, Mr. and Mrs. O. E. Green, John W. Graham, Mrs. Agnes Graham, S. B. Goodale;

Mr. and Mrs. B. F. Hitz, Mrs. Benjamin D. Hitz, Mr. and Mrs. John H. Holliday, Gustav J. Hess, Mrs. Kate Hunsden, Mrs. Ruth Hoffman, Mrs. Ella Holloran, Mrs. E. D. Hill, Mrs. Chas. B. Howland, Mrs. Clara Hildebrand, Mrs. Paul T. Hurt, Paul T. Hurt, Jr., Dr. W. I. Hurt, Sterling R. Holt, Mrs. Chas. D. Humes;

Mrs. William Iverson;

Mr. and Mrs. R. O. Johnson, Mrs. Mayme P. Judkins, Dr. Wm.

L. Jennings, Mrs. C. Rex Jackson, Mrs. Edward Johnson, Mrs. A. A. Judd, Mrs. Nellie Jaffe;

Mrs. Bernays Kennedy, Mrs. Katherine B. Kurtz, Mrs. Mary B. Kelly, John J. Kelly, Margaret Kahle, Kahn Tailoring Company, Mrs. Walter W. Kuhn, S. O. Kirkpatrick, Mrs. A. Kurr;

Mr. and Mrs. J. K. Lilly, Mr. and Mrs. Eli Lilly, John Langan, Robert Locke, Albert Lieber, Mr. and Mrs. H. E. Lochry;

Mrs. Eugene B. Mumford, Master Thomas Mumford, Jas. G. Morris, Ruth R. Maxwell, E. L. McDonald, Mrs. Eugene C. Miller, Mrs. A. V. Mangus, W. T. Magee, Mrs. Cynthia R. Maxwell, Mrs. Carrie R. McAdams, Alice Moore, H. P. Matthews, Margaret McCulloch, Mrs. L. P. Marshall, Mrs. F. W. Merry, Gertrude F. McHugh, Mrs. Margaret E. McHugh, Mrs. Thomas Mumford, Stella W. Morrison, Warren T. McCray, Chas. B. Maugham, Mrs. Albert Miller, Frances Morrison, Dr. and Mrs. P. E. McCown;

Mrs. John C. New;

Lena Ott, Mabel Omer, Mr. and Mrs. E. J. O'Reilly;

Mr. and Mrs. Harry A. Porter, Mrs. Henry C. Petcher;

Mrs. L. A. Quimby;

Mrs. J. W. Ricketts, Mr. and Mrs. Jno. F. Russell, E. Regan, Mrs. Nellie B. Ritter, Dr. E. T. Riley, Mr. and Mrs. E. L. Reeves, Mr. and Mrs. G. W. Reitenour, Mrs. Helen R. Russell, Grant Routh, Frank C. Rich, F. M. Read, Jessie E. Ribeyre, Mrs. Nellie B. Ritter, Dr. David Ross, Wm. M. Reeves, Lillian Reeves;

Guy L. Sparks, Mrs. J. W. Smith, Mrs. Ed. Snyder, Mrs. J. H. Smith, Robert E. Sweeney, H. B. Sheller, J. E. Stephens, Mrs. Frank Smith, Mrs. Blanche A. Stough, George B. Shoemaker, Chas. Scholer, Mr. and Mrs. A. E. Sanagan, A. F. Scales, E. H. Smith, Elizabeth Scholer, Mrs. J. W. Scherer, Joseph Sertell, G. A. Stephens, Mary L. Sullivan, Katharine Steinman, Mrs. Mary D. Sheerin;

Mae Taylor, Harry C. Thompson, Mr. and Mrs. A. C. Thomas, John E. Travis;

Mrs. F. C. Walker, Florence Walsh, Freda J. Wagner, Ava Whiteman, Jacob A. White, W. H. Wagner, Mrs. Laura Woodfill, Dr. H. H. Weer, Faye Wright, Mrs. Roy L. Williams, Mrs. F. N. Wise;

Louis J. Yorger, B. H. Yarling.

## APPENDIX

A COMPLETE list of the original members of Base Hospital 32 and Unit R who served with the hospital in France, together with their rank, duty, detached service, leaves of absence and other changes of status *while on duty with the organization*.\*

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Abbreviations: ARC—American Red Cross; Asst—assistant; APO—Army Post Office; BH—Base Hospital; BS—Base Section; Carp—Carpenter; Cent—Center; Civ Emp—Civilian Employee; Co—Company; CSO—Chief Surgeon's Office; Dept—Department; Div—Division; DS—Detached Service; EH—Evacuation Hospital; Elect—Electrician; Eng—Engineer; FA—Field Artillery; 1Cl—First Class; fr—from; Gen—General; Hosp—Hospital; Hdqrs—Headquarters; Inf—Infantry; Lab—Laboratory; MP—Military Police; Med—Medical; MSD—Medical Supply Depot; MTC—Motor Transport Corps; NCO—Non-Commissioned Officer; Plumb—Plumber; QM—Quartermaster; Rep—Replacement; Sec—Section; Sig—Signal; SOS—Service of Supplies; Sup—Supply; Surg—Surgical; Trans—Transferred.

- ALBRIGHT, Esther M.—Nurse, Night Supervisor Hosp A. Trans BH#90, 1-17-19.
- ALKIRE, Hazel—Nurse Hosp A. DS BH#90, 1-17-19 to 2-5-19. Leave Nice, 11-2-18 to 11-11-18.
- ANDERSON, Olga N.—Nurse Hosp A. DS BH#15, 12-29-17 to 1-24-18. Leave Nice, 11-25-18 to 12-8-18. Trans 3rd Army, 1-13-19.
- ANDERSON, Roy P.—Pvt 1Cl, 9-20-18. Orderly Hosp A. Leave St. Malo, 10-29-18 to 11-14-18.
- ANDREWS, Wells B.—Pvt 1Cl, 10-24-18. Orderly and Cook Hosp A-D. DS EH#2, 6-24-18 to 6-30-18. Leave Grenoble, 12-2-18 to 12-14-18.
- ANSTEAD, Robert C.—Pvt 1Cl, 8-1-18. Laboratory Asst Hosp E. Leave Haute Savoie Area, 9-10-18 to 9-24-18; Nice, 1-10-19 to 2-9-19.
- ASHE, John W.—Pvt 1Cl, 10-24-18. Cook Hosp E. Leave St. Malo, 10-29-18 to 11-14-18.
- ASHWORTH, Lewis N.—Sgt, 1-20-18; Sgt, 1Cl, 5-20-18. Pharmacist Med Div Hosp E. DS MSD#3 Cosne, 10-17-18 to 1-1-19; MSD BS#5 Brest, 1-1-19 to 1-17-19.

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\*Promotions and other changes of status occurring after the transfer of any individual from Base Hospital 32 are not given.

- ASPERGER, Otto—Corp, 1917; Sgt 1Cl, 1-1-18; Hosp Sgt, 10-10-18. Registrar Office, Hdqrs. DS Hdqrs SOS Tours, 1-13-19 to 1-20-19. Leave Haute Savoie Area, 7-7-18 to 7-19-18. Trans Hosp Cent Vittel, 2-2-19. Dropped fr Roll BH#32, 2-2-19.
- ATWOOD, Irwin W.—Pvt 1Cl, 10-24-18. Orderly Hosp A. Leave Grenoble, 12-13-18 to 12-27-18.
- BACHINGER, Elizabeth—Head Nurse Hosp D. DS Paris, 11-12-18 to 11-17-18. Leave Nice, 1-6-19 to 1-16-19.
- BAKER, Earl L.—Pvt 1Cl, 8-1-18; Sgt, 10-24-18. Registrar Office, Hdqrs. DS BH#15, 12-30-17 to 2-15-18; Hdqrs SOS Tours, 1-13-19 to 1-20-19. Leave Nice, 11-24-18 to 12-7-18.
- BALDWIN, Madge—Nurse Hosp C. DS 42nd Div, 5-4-18 to 6-27-18. Leave Nice, 12-10-18 to 12-23-18.
- BALDWIN, Wilbur—Pvt 1Cl, 10-24-18. Orderly APO. Leave Haute Savoie Area, 7-19-18 to 7-31-18; Salies du Sal, 1-27-19 to 2-3-19.
- BARNETT, Sylvester W.—Pvt 1Cl, 5-20-18; Surg Asst, 8-1-18. Surgery Hosp A. Leave Grenoble, 12-2-18 to 12-15-18.
- BARTLE, Albert J.—Pvt 1Cl, 10-24-18. Orderly Hosp B. Leave Grenoble, 11-25-18 to 12-7-18.
- BARWISE, John G.—Sgt, 1-12-18; Sgt 1Cl, 9-20-18. NCO in Charge Gen Detail. Leave Nice, 12-10-18 to 12-23-18.
- BAUER, Philomena—Nurse Hosp E. Leave Nice, 12-10-18 to 12-23-18.
- BECK, Lillie V.—Nurse Hosp A. DS Surg Team #19, 4-10-18 to 7-31-18. Leave Nice, 11-14-18 to 11-29-18.
- BECK, Richard—Cook, 9-2-17; Sgt, 2-18-18. NCO in Charge Kitchen Hosp A. DS St. Sebastian, 2-20-19 to 2-24-19. Leave Haute Savoie Area, 9-10-18 to 9-24-18.
- BEELER, Raymond C.—Lieut 1st, 6-1-17; Capt, 3-5-19. Roentgenology, Hosp A. DS N. Y. School of Roentgenology, Cornell Univ, 8-1-17 to 9-1-17; BH#15, 2-19-18 to 4-19-18. Leave Nice, 11-11-18 to 11-25-18.
- BEERS, Amy—Asst Chief Nurse. DS Paris, 7-13-18 to 7-18-18; EH#3 Toul, 8-27-18 to 11-2-18. Leave Nice, 12-28-18 to 1-9-19.
- BELL, Grace S.—Nurse Hosp A-D. Leave Nice, 12-7-18 to 12-20-18. Trans 3rd Army, 1-13-19.
- BENNETT, Hazel F.—Nurse Hosp A. DS Surg Team #20, 4-20-18 to 11-23-18. Leave Nice, 12-13-18 to 12-26-18.
- BERGER, Lowe F.—Pvt 1Cl, 9-20-18. Orderly Hosp A. Leave St. Malo, 10-12-18 to 10-26-18.
- BERGER, Martha R.—Nurse Hosp A-E. DS BH#15, 12-29-17 to 2-4-18. Leave Haute Savoie Area, 9-9-18 to 9-27-18. Trans USA, 1-8-19.

- BERRY, May—Nurse. Died Naval BH#1, Brest, 12-30-17.
- BIGGERT, Helen—Head Nurse Hosp E. Leave Nice, 12-8-18 to 12-19-18.
- BILTIMIER, Charles H.—Pvt 1Cl, 9-20-18. Orderly Hosp A-D. Leave Nice, 1-12-19 to 1-25-19.
- BIRCH, Nellie M.—Nurse Hosp B-D. DS BH#15, 12-29-17 to 2-4-18. Leave Paris, 2-7-19 to 2-11-19.
- BISHOP, Paul—Pvt 1Cl, 9-20-18; Corp, 11-18-18. Operating Room Hosp A. Leave Grenoble, 12-2-18 to 12-15-18; Chaumont, 1-29-19 to 2-2-19.
- BLANK, Dora L.—Nurse Hosp A-D. DS 42nd Div, 5-4-18 to 5-27-18. Leave Haute Savoie Area, 7-20-18 to 7-31-18; Nice, 1-10-19 to 1-22-19.
- BLUMENTHAL, Morris—Pvt 1Cl, 10-24-18. Gen Detail. DS BH#15, 12-30-17 to 2-15-18. Leave Paris, 9-5-18 to 9-10-18; Grenoble, 12-9-18 to 12-23-18.
- BORDERS, Dixie—Nurse Hosp A. Leave Biarritz, 8-29-18 to 9-10-18. Trans BH#90, 1-17-19.
- BOSTWICK, Mary E.—Civ Emp. Registrar Office, Hdqrs. DS CSO Hdqrs SOS, Tours, 7-11-18 to 7-28-18.
- BOWEN, Mary M.—Nurse Hosp C. DS ARC Hosp Paris, 5-2-18 to 5-18-18; Baccarat, 6-26-18 to 12-4-18; Trans ARC Hosp #3, 12-4-18.
- BOWMAN, Thomas—Pvt 1Cl, 9-20-18. Gen Detail. Leave Grenoble, 12-26-18 to 1-8-19.
- BOYER, Harry M.—Pvt. Orderly Hosp D. DS St. Nazaire, 2-17-19 to 2-24-19. Leave St. Malo, 10-12-18 to 10-26-18; Paris, 1-29-19 to 2-2-19.
- BOYLES, Bertha E.—Nurse Hosp A-C. DS BH#15, 12-29-17 to 2-4-18. Leave Nice, 12-9-18 to 12-21-18.
- BRADLEY, Bernard—Pvt 1Cl, 2-1-18. Garage Vittel. Leave Grenoble, 12-13-18 to 12-27-18.
- BREWER, Ralph J.—Sgt, 9-15-17; Sgt 1Cl, 10-24-18. NCO in Charge Hosp E. Leave Nice, 11-8-18 to 11-21-18.
- BROSNAN, William J.—Pvt 1Cl, 10-24-18. Gen Detail and MP. Leave Grenoble, 12-13-18 to 12-27-18; Nice, 1-28-19 to 2-9-19.
- BROWN, Harry M.—Pvt 1Cl, 8-1-18. Barber & Orderly Hosp E. Leave Haute Savoie Area, 7-7-18 to 7-19-18.
- BUBELIS, John—Corp, 8-1-18. Orderly Hosp B. DS BH#15, 1-5-18 to 3-18-18. Leave Nice, 11-24-18 to 12-7-18.
- BURLESON, Viola M.—Nurse Hosp A-C. DS BH#15, 12-29-17 to 2-4-18. Leave Nice, 9-26-18 to 10-8-18. Trans 3rd Army, 1-13-19.

- BYRNES, Harry F.—Capt, 1917; Major, 2-11-19. Chief Ophthalmological Dept Hosp A. DS Lyons, 4-13-18 to 4-23-18. Leave Nice, 7-4-18 to 7-25-18; Nice, 12-12-18 to 12-14-18. Trans Hosp Cent Savenay, 1-2-19.
- CALLIS, Harold B.—Corp, 1917; Sgt, 9-15-17; Sgt 1Cl, 1-1-18; Lieut 1st, 7-1-18. Mess Officer. Leave Nice, 11-18-18 to 12-2-18; Paris, 2-2-19 to 2-10-19. Detached, 4-11-19.
- CAMPBELL, Clarence L.—Corp, 8-1-18; Sgt, 11-18-18. In Charge Office Hosp E. DS BH#15, 12-30-17 to 2-15-18. Leave St. Malo, 10-29-18 to 11-14-18.
- CANTRALL, Archibald M.—Pvt 1Cl, 10-24-18. Orderly Hosp A. DS EH#2, 6-24-18 to 6-30-18. Leave Grenoble, 12-26-18 to 1-8-19.
- CARIS, Merle C.—Surg Asst, 10-24-18. Hosp A. Leave Haute Savoie Area, 9-10-18 to 9-24-18.
- CARROLL, John P.—Corp, 1918; Sgt, 1918. Asst Nose and Throat Dept Hosp A. DS MSD #3, Cosne, 10-17-18 to 1-20-19. Leave Haute Savoie Area, 8-22-18 to 9-4-18.
- CARTER, Charles—Gen Detail & Commissary, Vittel. DS BH#15, 12-30-17 to 2-15-18; Vittel, 7-12-18 to 2-21-19. Leave Grenoble, 12-9-18 to 12-23-18.
- CATHCART, Charlotte—Civ Emp. Secy Chief Surg Sec Hosp A. DS Savenay, 10-24-18 to 10-26-18. Leave Paris, 7-13-18 to 7-18-18.
- CHAPMAN, Colby L.—Pvt 1Cl, 9-20-18. MP & Orderly Hosp A. DS BH#15, 12-30-17 to 2-15-18. Leave Grenoble, 12-13-18 to 12-27-18.
- CLARK, Edmund D.—Major, 6-20-17, Lt-Col, 6-6-18. Commanding Officer. DS Surg Team #19, 4-9-18 to 4-20-18. Leave Nice, 12-18-18 to 12-28-18. Trans Casual Officers' Camp, Angers, 1-14-19.
- CLARKE, James F.—Major, 1917; Lt-Col, 3-5-19. Commanding Officer Unit R. DS ARC Hosp #5 Paris, 5-30-18 to 12-8-18.
- CLEMENTS, Julia—Nurse Hosp E. Leave Nice, 11-28-18 to 12-11-18.
- CLICKNER, Mayme C.—Nurse. Asst Head Nurse Hosp A-B. Leave Nice, 11-28-18 to 12-11-18.
- CONNAWAY, Jay—Orderly Hosp A. Trans 1st Rep Depot, 1-12-19.
- CONNELLY, Elizabeth A.—Nurse Hosp A. Leave Haute Savoie Area, 7-20-18 to 7-31-18; Nice, 1-10-19 to 1-22-19.
- COOKE, Raymond A.—Pvt 1Cl, 8-1-18. Elect QM Detail. Leave Grenoble, 12-2-18 to 12-15-18.
- COPPOCK, Orion O.—Pvt 1Cl, 8-1-18. Leave Grenoble, 12-2-18 to 12-15-18.
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FRENCH SOLDIERS PREPARING MESS



PART OF A FRENCH DIVISION PASSING THROUGH CONTREXAVILLE.

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- CORRIGAN, Vernon B.—Gen Detail. DS BH#15, 12-30-17 to 2-15-18. Leave Haute Savoie Area, 8-22-18 to 9-4-18. Trans Inf 1st Depot Div, 10-13-18.
- COTHARIN, Benjamin A.—MP & Orderly Hosp A. Leave St. Malo, 11-16-18 to 11-29-18.
- CROW, Ira N.—Lieut 1st, 8-11-17; Capt, 3-5-19. Medical Staff Hosp D. DS 42nd Div, 4-27-18 to 7-7-18. Leave Paris, 11-18-18 to 11-21-18; Paris, 12-26-18 to 12-29-18.
- DAUGHERTY, Albert L.—Pvt 1Cl, 10-24-18. Orderly Hosp D & Hdqrs. Leave Haute Savoie Area, 7-7-18 to 7-19-18; Nice, 1-24-19 to 2-10-19.
- DAVEY, John P.—Corp, 8-1-18. Hdqrs Office. DS BH#15, 12-30-17 to 2-15-18. Leave Grenoble, 12-13-18 to 12-26-18.
- DAVIES, Nelle—Nurse Hosp C. DS BH#90, 1-17-19 to 2-5-19. Leave Nice, 11-18-18 to 11-28-18.
- DAVIS, Nelle B.—Nurse Hosp E. DS BH#15, 12-29-17 to 2-4-18. Leave Nice, 11-25-18 to 12-8-18.
- DAVIS, William P.—Dental Dept Hosp A. DS BH#15, 12-30-17 to 2-15-18. Trans ARC Hosp #1, 6-1-18.
- DAY, John T.—Lieut 1st, 8-28-17; Capt, 5-5-19. Medical Staff Hosp A. DS Cent Med Lab, 6-24-18 to 7-8-18. Trans BH#101, 7-10-18.
- DEAN, David—Orderly Hosp A-C. Leave Paris, 9-5-18 to 9-10-18. Trans Cent Med Lab, 10-21-18.
- DELANEY, Joseph C.—Pvt 1Cl, 4-1-18. Orderly Hosp D. DS BH#15, 12-30-17 to 2-15-18. Leave Haute Savoie Area, 7-19-18 to 7-31-18.
- DIEMER, Vinton E.—Cook, 10-1-18. Kitchen Hosp E. Leave Grenoble, 11-25-18 to 12-7-18.
- DILLON, Ruth E.—Nurse Hosp A. DS Surg Team #19, 4-10-18 to 7-31-18. Leave Nice, 11-14-18 to 11-29-18; Paris, 2-7-19 to 2-10-19.
- DOWNARD, Claude E.—Pvt 1Cl, 5-20-18; Sgt, 3-6-19. Med Sup Vittel. Leave St. Malo, 10-12-18 to 10-26-18; Paris, 1-29-19 to 2-2-19.
- DRAKE, Moris W.—Pvt 1Cl, 2-1-18; Sgt, 9-20-18. Elect in Charge Power Plant QM Detail. Leave Nice, 12-28-18 to 1-10-19; Le Boulé, 3-19-19 to 3-23-19.
- DROSDOWITZ, Morris—Pct 1Cl, 10-24-18. Garage Vittel. DS EH#2, 6-24-18 to 6-30-18. Leave Paris, 9-5-18 to 9-10-18; Grenoble, 12-13-18 to 12-27-18; Nice, 1-28-19 to 2-9-19.
- DUCK, C. Curtis—Corp, 9-15-17; Sgt, 4-17-18; Lieut 1st, 9-5-18. Registrar Hdqrs. DS Hdqrs SOS Tours, 1-13-19 to 1-18-19. Leave Haute Savoie Area, 7-19-18 to 7-31-18; Paris, 12-11-18 to 12-16-18.

- DUFFY, Joseph A.—Corp, 5-20-18; Sgt, 11-18-18. NCO in Charge Bath House. Leave St. Malo, 11-16-18 to 11-30-18.
- DUNCAN, John H.—Corp, 1917; Sgt, 1918. Deachment Office. Leave St. Malo, 11-16-18 to 11-30-18.
- EALY, Emma F.—Nurse Hosp A-C. Leave Haute Savoie Area, 8-17-18 to 8-26-18.
- EARNEST, Herman L.—Pvt 1Cl, 10-24-18. Orderly Hosp A. DS BH#15, 12-30-17 to 2-15-18. Leave Grenoble, 12-2-18 to 12-16-18.
- EDWARDS, Cornelius M.—Pvt 1Cl, 10-24-18. Orderly Hosp A. Leave St. Malo, 11-16-18 to 11-30-18.
- EDWARDS, Scott R.—Lieut 1st, 8-19-17; Capt, 12-19-18. Cent Lab. DS Epernay, 4-14-18 to 4-24-18; EH#1, 4-26-18 to 5-15-18; Cent Lab Dijon, 5-17-18 to 5-20-18. Trans ARC Hosp #104, 5-20-18.
- ELDER, Mary L.—Nurse. Hosp A. Leave Nice, 12-10-18 to 12-23-18.
- ERDMANN, Ernest T.—Pvt 1Cl, 10-24-18. Orderly Hosp A. DS BH#15, 12-30-17 to 2-15-18. Leave Dinard, 11-8-18 to 11-25-18.
- ERVIN, Jessie M.—Nurse Hosp A-D. Trans BH#8, 8-4-18.
- ESSIG, Maude F.—Nurse Hosp A. DS BH#15, 12-29-17 to 2-4-18. Leave Haute Savoie Area, 8-17-18 to 8-26-18.
- EUDALY, Rufus A.—Pvt 1Cl, 10-24-18. Orderly Hosp A. Leave Grenoble, 12-9-18 to 12-23-18.
- FEHR, Winters W.—Pvt 1Cl, 9-20-18. Orderly Hosp E. Leave Grenoble, 12-13-18 to 12-27-18.
- FEIRRELL, Clem R.—Pvt 1Cl, 9-20-18. Orderly Hosp A. DS BH#15, 12-30-17 to 2-15-18. Leave Grenoble, 12-2-18 to 12-16-18.
- FERGUSON, Mary—Nurse Night Supervisor. DS Surg Team #19, 4-10-18 to 10-11-18. Trans Mobile Hosp #11, 10-11-18.
- FERREL, Paul O.—Pvt 1Cl, 5-20-18. Orderly Hosp A. Leave Haute Savoie Area, 10-1-18 to 10-16-18.
- FINLEY, Georgia—Civ Emp. Dietitian. Leave Haute Savoie Area, 7-8-18 to 7-19-18.
- FISHBACK, George—Corp, 11-11-17; Sgt, 1-16-18; Lieut 2nd, 12-7-18. Quartermaster, Hdqrs. Leave Nice, 8-26-18 to 9-10-18; Paris, 12-11-18 to 12-18-18.
- FISHER, Harry W.—Gen Detail. Leave Grenoble, 11-25-18 to 12-5-18.
- FISK, Kenneth—Orderly Hosp D. Trans 12th Service Co Sig Corps, 10-7-18.
- FITCHETT, Earl H.—Pvt1Cl, 9-20-18. Carp & Orderly Hosp B. DS BH#15, 12-30-17 to 2-15-18. Leave Grenoble, 11-25-18 to 12-7-18.

- FLETCHER, Harry H.—Pvt 1Cl, 2-1-18. Med Sup Room & Gen Detail. Leave Grenoble, 12-9-18 to 12-23-18.
- FOREMAN, Walter A.—Orderly Hosp D. Leave Grenoble, 12-9-18 to 12-23-18.
- FOX, Malcolm—Gen Detail. Leave Grenoble, 12-19-18 to 1-1-19.
- FRANCIS, Joseph M.—Chaplain ARC.
- FROST, Geraldine R.—Civ Emp. Secretarial work Hdqrs. Trans CSO Hdqrs SOS Tours, 7-11-18.
- FULLER, Frank M.—Capt, 7-19-17. Officer in Charge Hosp E. Trans Hdqrs BS #6 Marseilles, 10-31-18.
- FUNKHOUSER, Elmer—Lieut 1st, 9-26-17; Capt, 3-6-19. Pathologist & Serologist Cent Lab. DS 42nd Div, 4-26-18 to 6-21-18; Cent Med Lab, 7-1-18 to 7-20-18. Leave Paris, 12-5-18 to 12-10-18.
- GAITHER, Benjamin H.—Pvt 1Cl, 2-1-18; Corp, 9-24-18. Carp QM Detail. Leave Grenoble, 11-25-18 to 12-8-18.
- GAUMER, Harvey E.—Pvt 1Cl, 10-24-18. Orderly Hosp A. Trans Hosp Cent Limoges, 12-15-18. Dropped fr roll BH#32, 12-15-18.
- GEISE, Terry—Pvt 1Cl, 8-1-18. MP & Gen Detail. Leave Haute Savoie Area, 8-22-18 to 9-4-18.
- GENOLIN, Susan—Nurse Hosp C. DS BH#15, 12-29-17 to 2-4-18. Leave Haute Savoie Area, 7-16-18 to 7-27-18; Nice, 1-10-19 to 1-22-19.
- GILES, Roger—Orderly Hosp D-E. DS EH#2, 6-24-18 to 6-30-18. Leave Haute Savoie Area, 11-21-18 to 12-3-18; Paris, 12-20-18 to 12-25-18.
- GILMORE, Harry C.—Pvt 1Cl, 10-24-18. Orderly Hosp A. Leave Haute Savoie Area, 7-7-18 to 7-19-18.
- GLOTFELTY, Warner A.—Pvt 1Cl, 5-20-18. Registrar Office, Hdqrs. Leave Grenoble, 12-2-18 to 12-15-18.
- GOODALE, Homer B.—MP & Gen Detail. Leave Haute Savoie Area, 9-10-18 to 9-24-18.
- GRABER, Kathryn O.—Nurse Hosp E. DS Baccarat, 6-24-18 to 6-30-18; BH#90, 1-17-19 to 2-5-19. Leave Nice, 12-11-18 to 12-24-18.
- GRAHAM, Alois B.—Capt, 7-15-17; Major, 10-1-18; Chief Surg Sect. Trans Argens, 1-10-19.
- GRAHAM, Paul R.—Pvt 1Cl, 5-20-18; Surg Asst, 9-25-18. Orderly Hosp A. Leave Grenoble, 12-13-18 to 12-26-18.
- GRAY, Edna June—Nurse. Supervisor of Surgeries Hosp A. DS ARC Bureau of Surg Dressings Paris, 1-10-18 to 2-18-18. Leave Haute Savoie Area, 7-16-18 to 7-27-18; Nice, 1-10-19 to 1-22-19.
- GRAY, Henry A.—Capt, 7-10-17; Major, 3-5-19. Surgical Staff Hosp A.

- GREEN, Hugh H.—Pvt 1Cl, 8-1-18. Gen Detail. Leave Haute Savoie Area, 7-7-18 to 7-19-18.
- GREENHALGH, Sarah—Nurse. Anæsthetist Hosp A. DS BH#90, 1-17-19 to 2-5-19. Leave Nice, 11-13-18 to 11-28-18.
- GREGORY, Earl M.—Garage, Vittel. DS MTC, 10-31-18 to 2-18-19. Leave Haute Savoie Area, 7-19-18 to 7-31-18.
- GRIFFITH, John L.—Pvt 1Cl, 8-1-18. Garage Vittel.
- GRIM, Mary Gladys—Nurse Hosp A-D. Leave Nice, 12-10-18 to 12-23-18. Trans 3rd Army, 1-13-19.
- HAGAMAN, Edd G.—Pvt 1Cl, 2-1-18; Surg Asst, 2-18-18. Dental Dept Hosp A. Leave Haute Savoie Area, 7-7-18 to 7-19-18. Trans Attend. Surgeon, Nice, 1-2-19.
- HAMILTON, Hallie L.—Cook Hosp D. Leave Haute Savoie Area, 7-19-18 to 7-31-18.
- HART, Samuel O.—Orderly Hosp D. Leave Grenoble, 12-13-18 to 12-27-18.
- HARVEY, Alice B.—Trans BH#8, 3-29-18.
- HAUMERSON, Clifford C.—Gen Detail. DS ARC Hosp #5, 5-28-18 to 12-8-18.
- HEFFNER, Robert T.—Pvt 1Cl, 2-1-18; Corp, 8-1-18; Sgt, 10-24-18; Sgt 1Cl, 11-18-18. Pharmacist Hosp E. Leave Nice, 8-26-18 to 9-10-18.
- HEMMINGER, Creigh C.—Gen Detail. Leave St. Malo, 11-16-18 to 11-30-18.
- HENKE, Margaret C.—Nurse. Anæsthetist Hosp A. Leave Haute Savoie Area, 7-20-18 to 7-31-18; Nice, 1-10-19 to 1-22-19.
- HERBERT, Lewis C.—Cook, 10-1-18. Kitchen Nurses' Quarters. Leave Grenoble, 12-9-18 to 12-23-18.
- HEROD, Mary Beaty—Civ Emp, 10-19-17. Interpreting & Clerical Work Hdqrs. Leave Paris & Tours, 8-27-18 to 9-4-18.
- HERRICK, John F.—Capt, 6-27-17; Major, 11-14-18. Officer in Charge Hosp C. Leave Paris, 11-25-18 to 11-28-18; Paris, 4-1-19 to 4-2-19.
- HESS, Elmer H.—Gen Detail. Leave Grenoble, 11-21-18 to 12-6-18; Lyon, 1-27-19 to 2-2-19.
- HICKS, Wilbur—Kitchen Hosp A. Leave Haute Savoie Area, 10-1-18 to 10-14-18.
- HILAND, Emmett—Pvt 1Cl, 10-24-18. Orderly Hosp D.
- HILDEBRAND, Howard E.—Gen Detail. DS F. A. School, Saumer, 8-28-18 to 12-4-18. Leave Grenoble, 12-26-18 to 1-8-19.
- HITZ, Benjamin D.—Corp, 9-15-17; Sgt 1Cl, 1-1-18; Lieut 1st, 5-2-18; Capt, 3-6-19. Medical Supply Officer. DS Tours, 2-5-19 to 2-9-19. Leave St. Aignan, 7-5-18 to 7-10-18; Nice, 11-11-18 to 11-25-18.





ON BOARD THE FREEDOM



LOAFING BETWEEN INSPECTIONS

- HOBBS, William L.—Corp, 11-18-18. In charge Office Hosp C. Leave Nice, 12-10-18 to 12-23-18.
- HOFFMAN, John W.—Pvt 1Cl, 8-1-18. Gen Detail. Leave St. Malo, 10-12-18 to 10-26-18.
- HOLLENBECK, Harry R.—Sgt, 2-22-18; Sgt 1Cl, 9-20-18. Asst NCO in Charge Hosp A. DS Surg Team #20, 4-21-18 to 7-14-18; Surg Team #20, 10-30-18 to 11-24-18. Leave Nice, 12-12-18 to 12-24-18.
- HOLLINGSWORTH, Herman H.—Pvt 1Cl, 3-1-18; Sgt, 10-24-18. Cent Lab. DS Surg Team #20, 4-21-18 to 7-14-18. Leave Nice, 11-24-18 to 12-7-18.
- HOLLORAN, John J.—Plumb QM Detail. Leave Haute Savoie Area, 10-1-18 to 10-14-18.
- HOUSER, Mary B.—Nurse Hosp E. DS BH#15, 12-29-17 to 1-24-18. Leave Haute Savoie Area, 8-17-18 to 8-26-18.
- HUMES, Charles D.—Capt, 1917; Major, 11-14-18. Consultant Neuropsychiatrist. DS BH#8, 2-15-18 to 6-24-18; Vittel-Contrexéville Center, 6-24-18 to 1-2-19. Leave Nice, 12-18-18 to 12-28-18. Trans Angers, 1-2-19.
- HUNT, Birda R.—Nurse Hosp D. DS 42nd Div, 5-4-18 to 6-27-18. Leave Nice, 9-26-18 to 10-8-18. Trans 3rd Army, 1-13-19.
- HUNT, Edmund V.—Pvt 1Cl, 9-20-18. Orderly Hdqrs. Leave Haute Savoie Area, 9-10-18 to 9-24-18; Paris, 1-28-19 to 2-2-19.
- HUNSDEN, Robert V.—Pvt 1Cl, 10-24-18. Orderly Hosp D. Leave St. Malo, 10-12-18 to 10-26-18.
- HURT, Paul T.—Lieut 1st, 8-19-17; Capt, 3-6-19. Surgical Staff Hosp A. DS 42nd Div, 4-27-18 to 7-3-18. Leave Paris, 1-7-19 to 1-14-19.
- HUTTON, Brace E.—Cook, 9-1-18. Kitchen Hosp B. Leave St. Malo, 11-3-18 to 11-19-18.
- IKERD, Ruth H.—Nurse Hosp A. Leave Nice, 9-13-18 to 9-24-18; Paris, 2-3-19 to 2-5-19.
- IVERSON, William V.—Pvt 1Cl, 10-24-18. Carp QM Detail. Leave Grenoble, 12-9-18 to 12-23-18.
- JACKSON, Coutsie R.—Corp, 8-1-18. QM Commissary. Leave Nice, 12-22-18 to 12-24-18; Coblenz, 1-10-19 to 1-16-19.
- JAMES, Lora D.—Capt, 1917. Surgical Staff Hosp A. DS 42nd Div, 5-2-18 to 7-3-18; Surg Team #20, 7-17-18 to 11-24-18.
- JENNINGS, Loomis—Corp, 1917; Sgt 1Cl, 1-1-18; Hosp Sgt, 4-17-18; Master Hosp Sgt, 10-22-18. Sergeant-Major Hdqrs. Leave Nice, 12-12-18 to 12-24-18.
- JERICHO, Paul B.—Pvt 1Cl, 10-24-18. Orderly Hosp B. DS EH#2, 6-24-18 to 6-30-18. Leave Grenoble, 12-13-18 to 12-27-18; Paris, 1-28-19 to 2-2-19.

- JOHNSON, Richard K.—Pvt 1Cl, 2-1-18. Garage Vittel. DS Surg Team #20, 7-17-18 to 10-4-18. Leave Grenoble, 12-9-18 to 12-23-18.
- JOHNSON, William A.—Cook. Kitchen Hosp E. Leave Haute Savoie Area, 9-10-18 to 9-24-18.
- JOHNSON, William C.—Pvt 1Cl, 5-20-18. MP. DS Is-sur-Tille, 9-15-18 to 9-23-18; Vichy, 10-15-18 to 10-19-18. Leave St. Malo, 11-8-18 to 11-25-18; Nice, 1-28-19 to 2-9-19.
- JOHNSTON, Clarence S.—Corp, 1917. Registrar's Office Hdqrs. Leave St. Malo, 10-29-18 to 11-14-18; Paris, 4-1-19 to 4-5-19.
- JOHNSTON, Kenneth L.—Lieut 1st, 1917. Surgical Staff Hosp A. DS Surg Team #20, 4-20-18 to 7-14-18; Surg Team #19, 7-15-18 to 2-11-19.
- JONES, Dwight K.—Garage Vittel. DS Entertainment Section AEF, 2-19-19 to 4-19-19.
- JONES, Gerald G.—Pvt 1Cl, 8-1-18; Cook, 10-1-18. Mess Supply Room Hosp E. Leave Haute Savoie Area, 8-22-18 to 9-4-18; Paris, 1-9-19 to 1-15-19.
- JUDD, Arthur A.—Sgt 1Cl, 8-1-18. MP & Hdqrs, DS Hdqrs Adv Sec SOS, 11-5-18 to 11-7-18; Langres, 11-10-18 to 11-12-18. Leave Haute Savoie Area, 7-19-18 to 7-31-18; Lyon, 1-22-19 to 1-27-19.
- JUDKINS, Basil D.—Pvt 1Cl, 5-20-18. Garage Vittel. Leave Haute Savoie Area, 7-7-18 to 7-19-18; Verdun, 12-27-18 to 12-31-18.
- KAHLE, Edward C.—Gen Detail. DS EH#2, 6-24-18 to 6-30-18. Leave Haute Savoie Area, 8-22-18 to 9-4-18; Haute Savoie Area, 10-1-18 to 10-13-18. Trans Inf 1st Depot Div, 10-13-18.
- KELLY, Charles B.—Gen Detail. DS BH#15, 12-30-17 to 2-15-18; Surg Team #20, 7-17-18 to 11-24-18. Leave Nice, 12-19-18 to 1-1-19.
- KENNEDY, Bernays—Major, 7-23-17; Chief Medical Section. DS Baccarat, 5-1-18 to 5-7-18; Paris, 5-15-18 to 5-22-18; Exermont, 10-15-18 to 10-19-18. Leave Nice, 7-2-18 to 7-14-18.
- KENNEDY, Mary—Nurse Hosp A. DS BH#15, 12-29-17 to 1-24-18; ARC Paris, 5-2-18 to 5-18-18. Leave Haute Savoie Area, 7-8-18 to 7-19-18; Nice, 1-10-19 to 1-22-19.
- KIRKPATRICK, Russell B.—Kitchen Hosp A. Leave Haute Savoie Area, 8-22-18 to 9-4-18.
- KOCHMAN, Mary F.—Nurse Hosp A. DS BH#15, 12-29-17 to 2-4-18. Leave Nice, 9-13-18 to 9-24-18; Paris, 2-3-19 to 2-5-19.
- KROEGER, John P.—Pvt 1Cl, 10-24-18. Tailor & Gen Detail. Leave Haute Savoie Area, 7-7-18 to 7-19-18.
- KURR, Edward—Pvt 1Cl, 9-20-18. Orderly Hosp A. Leave Nice, 11-24-18 to 12-7-18; Rheims, 2-4-19 to 2-9-19.



- LAMSON, Charles S.—Pvt 1Cl, 5-20-18. Gen Detail. Leave St. Malo, 10-29-18 to 11-14-18; Paris, 1-29-19 to 2-2-19.
- LANAHAN, Cornelius J.—Pvt 1Cl, 10-24-18. MP & Gen Detail. Leave Grenoble, 12-13-18 to 12-27-18.
- LANAHAN, Thomas—Pvt 1Cl, 9-20-18; Corp, 12-1-18; Sgt, 1-1-19. QM Office. DS Chief Surgeon AEF, 11-13-18 to 1-26-19. Leave Haute Savoie Area, 7-7-18 to 7-19-18.
- LANCASTER, Alma—Nurse Hosp A. DS BH#90, 1-17-19 to 2-18-19. Leave Nice, 11-10-18 to 11-23-18.
- LANGAN, John A.—Sgt, 9-20-18; Mess Sgt, 10-1-18. Mess Sgt. Leave Nice, 11-8-18 to 11-21-18.
- LARIMER, Milton—Pvt 1Cl, 10-24-18. Orderly Hosp E. Leave Grenoble, 12-9-18 to 12-23-18.
- LARAMORE, John C.—Pvt 1Cl, 9-20-18. Orderly Hosp C. DS EH#2, 6-24-18 to 6-30-18. Leave St. Malo, 11-16-18 to 11-30-18.
- LESSENGER, Ethel—Nurse Hosp A-B. Leave Nice, 12-7-18 to 12-20-18.
- LINDBOM, Ellwood—Pvt 1Cl, 10-24-18. Orderly Hosp D-B. Leave Haute Savoie Area, 7-19-18 to 7-31-18.
- LOCHRY, Ralph L.—Lieut 1st, 8-19-17. Surgical Staff. X-Ray Dept. DS Surg Team #19, 4-9-18 to 7-17-18. Trans BH#116, 7-17-18.
- LOCKE, Lloyd L.—Mess Sgt, 10-1-18. Kitchen Hosp A. Leave St. Malo, 11-3-18 to 11-19-18.
- LOECHLE, William P.—Cook. Kitchen A-E. Leave Grenoble, 12-13-18 to 12-27-18.
- LOGAN, Luke—Pvt 1Cl, 9-20-18. Orderly Hosp A. Leave Grenoble, 12-2-18 to 12-16-18; Le Mans, 4-2-19 to 4-6-19.
- LOUNSBURY, Clifford—Pvt 1Cl, 9-20-18. Orderly Hosp A. Leave Grenoble, 12-13-18 to 12-26-18; Paris, 3-6-19 to 3-10-19.
- LUKENS, John E.—Corp, 1917; Sgt, 8-1-18; Sgt 1Cl, 4-1-19. NCO in Charge Kitchen Hosp B. DS MSD #3, 10-17-18 to 1-14-19; Le Boule, 2-19-19 to 2-27-19. Leave Nice, 8-23-18 to 9-7-18.
- LUPTON, Clifford E.—Dental Dept Hosp A.
- LUSK, Mabel—Nurse Hosp A-B. DS BH#90, 1-17-19 to 2-5-19. Leave Nice, 11-18-18 to 11-28-18.
- LYONS, Marchael C.—Pvt 1Cl, 5-1-18; Surg Asst, 5-15-18. Surg Asst Hosp A. Leave Grenoble, 12-9-18 to 12-23-18; Le Mans, 1-24-19 to 1-31-19.
- MCARDLE, John—Pvt 1Cl, 2-1-18; Sgt, 11-18-18. DS ARC Hosp #1 Paris, 4-9-18 to 7-31-18; 116 Eng, 11-26-18 to 12-3-18. Leave St. Malo, 11-8-18 to 11-25-18. Trans Discharge Camp St. Aignan, 3-19-19.

- McBEE, Mary R.—Nurse Hosp A. DS BH#15, 12-29-17 to 2-4-18. Leave Nice, 12-8-18 to 12-19-18.
- McCARTY, Clarence M.—Orderly Hosp A. Leave Grenoble, 12-9-18 to 12-23-18.
- McCLURE, William N.—Garage Vittel. Leave Haute Savoie Area, 9-10-18 to 9-24-18. Trans Discharge Camp St Aignan, 4-11-19.
- McCOPPIN, Margaret—Nurse Hosp E. DS BH#15, 12-29-17 to 2-4-18; Baccarat, 6-26-18 to 2-13-19. Trans Baccarat, 2-13-19.
- McCULLOCH, Charleton B.—Capt, 4-10-17; Major, 11-17-17; Lt-Col, 10-23-18. Surgical Staff Hosp A. DS Surg Team #19, 4-9-18 to 9-26-18. Trans Mobile Hosp #11, 9-26-18.
- McDONALD, Irwin C.—Orderly Orthopedic Dept Hosp A. Leave Haute Savoie Area, 7-19-18 to 7-31-18.
- McDOUGALL, Duncan C.—Pvt 1Cl, 2-1-18; Sgt, 2-22-18; Sgt 1Cl, 10-24-18. NCO in Charge MSD Vittel. Leave St. Andrews, Scotland, 2-1-19 to 2-24-19.
- McELWAIN, Jay B.—Sgt, 3-1-18; Sgt 1Cl, 9-20-18. NCO in Charge Plumb, QM Detail. Leave Paris, 1-10-18 to 1-16-18; Haute Savoie Area, 7-7-18 to 7-19-18; Paris, 1-4-19 to 1-8-19. Trans Camp #91 Le Boule, 3-4-19.
- McGIFFIN, William J.—Sgt, 12-17-17; Sgt 1Cl, 9-20-18. NCO in Charge Hosp C. Leave Nice, 11-8-18 to 11-21-18.
- McGUIRE, Roy A.—Capt, 1917. DS Paris, 5-30-18 to 12-12-18; Le Boule, 2-20-19 to ——. Dropped fr roll BH#32, 2-20-19.
- McHUGH, Thomas D.—Corp, 9-30-17; Sgt, 3-17-18; Sgt 1Cl, 8-1-18. NCO in Charge Hosp D. DS BH#15, 12-30-17 to 2-15-18. Leave Nice, 11-8-18 to 11-22-18.
- McINTIRE, John D.—Barber & Orderly Hosp A. Leave Grenoble, 12-9-18 to 12-23-18; Le Mans, 1-28-19 to 2-3-19.
- McLAUGHLIN, Cyril A.—Pvt 1Cl, 10-24-18. Orderly Hosp E. DS MSD #3, 11-26-18 to 12-21-18; MSD BS#2, 1-10-19 to 2-17-19.
- MAGEE, George E.—Sgt, 2-22-18. NCO in Charge X-Ray Dept Hosp A. Trans BH#8, 9-29-18.
- MAHAN, Bertha B.—Head Nurse Hosp B. DS ARC Bureau of Surg Dressings Paris, 1-10-18 to 2-31-18; BH#90, 1-17-19 to 2-5-19. Leave Nice, 11-2-18 to 11-11-18.
- MANGAN, Mary—Nurse Hosp A. DS BH#15, 12-29-17 to 1-24-18; Surg Team #19, 7-28-18 to 10-11-18. Trans Mobile Hosp #11, 10-11-18.
- MANGUS, Artie V.—Pvt 1Cl, 8-1-18; Dispensary Asst, 10-24-18. Pharmacy Hosp A. Leave Haute Savoie Area, 7-7-18 to 7-19-18; Mussy-sur-Seine, 12-21-18 to 12-25-18.
- MARSHALL, Walker R.—Pvt 1Cl, 5-20-18. X-Ray Dept Hosp A. Leave Grenoble, 12-13-18 to 12-27-18.

- MARTIN, Florence J.—Chief Nurse BH#32. DS Paris, 5-25-18 to 5-30-18; Paris, 8-19-18 to 8-22-18; Savenay, 10-22-18 to 10-26-18. Leave Nice, 1-6-19 to 1-16-19.
- MARTIN, Paul F.—Capt, 1917. Surgical Staff. DS Surg Team #20, 4-20-18 to 7-14-18; Surg Team #20 EH#7, 7-17-18 to 11-27-18. Trans EH #3, 11-30-18.
- MATTHEWS, Paul R.—Pvt 1Cl, 2-1-18; Corp, 11-18-18. Office Hosp D. DS Eprenay, 4-14-18 to 5-20-18. Leave Haute Savoie Area, 7-19-18 to 7-31-18.
- MAUGHAM, John R.—Pvt 1Cl, 9-20-18. MP & Gen Detail. DS EH#3, 8-26-18 to 11-2-18.
- MAXWELL, Leslie H.—Lieut 1st, 1917. Medical Staff Hosp E. DS Cent Med Lab, 5-30-18 to 6-7-18. Leave Chambery, 7-17-18 to 7-30-18. Trans Mobile Hosp #11, 10-13-18.
- MEHLER, Frank R.—Lieut 1st, 1917. Surgical Staff Hosp A. DS Cent Med Lab, 7-21-18 to 7-26-18; EH#3, 8-27-18 to 10-13-18; Mobile Hosp #11, 10-13-18 to 1-31-19.
- MELLIS, Bruce A.—Cook, 10-1-18. Kitchen Hosp A. Leave St. Malo, 11-3-18 to 11-19-18.
- MELVILLE, Elizabeth—Nurse. Linen Room Hosp A. DS Paris, 11-12-18 to 11-17-18.
- MILLER, Elmer E.—Cook. Kitchen Hosp E. Leave Haute Savoie Area, 9-10-18 to 9-24-18.
- MILLER, Estelle F.—Nurse. Surgery Hosp A. DS BH#15, 12-29-17 to 2-4-18. Leave Haute Savoie Area, 7-8-18 to 7-19-18. Trans BH#8, 10-21-18.
- MILLER, Jeanette A.—Nurse Hosp A-D. Trans BH#8, 8-4-18.
- MONTGOMERY, Johanna—Nurse Hosp A. Leave Haute Savoie Area, 7-20-18 to 7-31-18. Trans 3rd Army, 1-13-19.
- MOORE, Robert M.—Lieut 1st, 9-1-17; Capt, 11-11-18. Officer in Charge Hosp D. DS St. Nazaire, 2-17-19 to 2-24-19. Leave Nice, 4-24-19 to 5-6-19. Trans Embark Center Le Mans, 3-7-19.
- MORGAN, Pierre S.—Pvt 1Cl, 8-1-18; Sgt, 10-24-18. NCO in Charge Morgue. Leave Nice, 12-10-18 to 12-23-18.
- MOWRER, Edna C.—Nurse. Surgery Hosp A-B. DS BH#15, 12-29-17 to 2-4-18. Leave Nice, 12-9-18 to 12-21-18.
- MULCAHY, Paul W.—Orderly Hosp D. Leave Grenoble, 12-13-18 to 12-27-18. Trans fr BH#31 to US Hosp Train, 1-8-19.
- MULLEN, Mary E.—Nurse Hosp E. DS BH#15, 12-29-17 to 2-4-18. Leave Nice, 12-9-18 to 12-21-18.
- MUMFORD, Eugene B.—Capt, 9-1-17. Orthopedic Surgeon Hosp A. DS Belgium, 1-29-18 to 3-15-18; Surg Team #20, 4-20-18 to 7-14-18. Trans BH#9, 11-6-18.
- NEED, Clara LaV.—Nurse Hosp A-C. DS BH#90, 1-17-19 to 2-18-19. Leave Nice, 11-30-18 to 12-13-18.

- NEWKIRK, Fred N.—Pvt 1Cl, 9-20-18. Garage Vittel.
- NORRIS, Joseph C.—Cook. Kitchen Hosp B.
- OATMAN, Sherman H.—Cook. Kitchen Hosp B. Leave St. Malo, 11-16-18 to 11-30-18.
- O'CONNELL, Mayme—Nurse Hosp A. DS BH#15, 12-29-17 to 1-24-18; 42nd Div, 5-4-18 to 6-27-18. Leave Nice, 11-28-18 to 12-11-18.
- O'HERN, Wade J.—Corp, 9-22-17; Sgt, 5-20-18. Asst NCO in Charge Hosp A. Leave Nice, 8-26-18 to 9-10-18.
- O'KEEFE, Marie—Nurse Hosp A-D. Leave Nice, 11-10-18 to 11-23-18.
- O'REILLY, Raymond—Pvt 1Cl, 8-1-18; Sgt, 10-24-18. Hosp A. Leave Nice, 11-24-18 to 12-7-18.
- OSTENZI, Florine—Nurse Hosp A. DS BH#15, 12-29-17 to 2-4-18; Baccarat, 6-24-18 to 6-30-18; Surg Team #20, 7-24-18 to 11-23-18. Leave Nice, 12-13-18 to 12-26-18. Trans 3rd Army, 1-13-19.
- PAGE, Lafayette—Capt, 1917; Major, 10-1-18. DS Paris, 5-17-18 to 5-27-18. Leave Nice, 7-4-18 to 7-25-18; Lonedre, 11-23-18 to 11-30-18. Trans Angers, 1-10-19.
- PARRETT, Ralph C.—Leave Grenoble, 12-13-18 to 12-27-18.
- PAYNE, Lena Lee—Nurse Hosp A. DS BH#15, 12-29-17 to 1-24-18; Baccarat, 6-26-18 to 12-31-18. Trans Hosp Cent Savenay, 12-31-18.
- PEACOCK, Elsie—Nurse. Surgery Hosp A-B. DS BH#15, 12-29-17 to 1-24-18; Baccarat, 6-24-18 to 6-30-18. Leave Nice, 11-25-18 to 12-8-18. Trans 3rd Army, 1-13-19.
- PLOUGH, Vern F.—Sgt, 11-18-18. NCO in Charge Kitchen Hosp D. Leave Nice, 12-10-18 to 12-23-18.
- PLUMB, Theodore G.—Pvt 1Cl, 5-20-18; Sgt, 10-24-18. Office QM Dept, Hdqrs. Leave St. Malo, 10-12-18 to 10-26-18.
- POINDEXTER, Harold B.—Orderly Hosp A. Sent to BH#16, 10-22-18. Dropped fr roll BH#32, 11-29-18.
- PORTER, Whitney C.—Pvt 1Cl, 8-1-18. Mail Orderly, Hdqrs. Leave Haute Savoie Area, 7-7-18 to 7-19-18; Paris, 1-28-19 to 2-2-19.
- POTTER, Evelyn—Nurse Hosp B-C. DS BH#15, 12-29-17 to 2-4-18. Leave Nice, 11-30-18 to 12-13-18. Trans 3rd Army, 1-13-19.
- POWER, Earl D.—Pvt 1Cl, 10-24-18. Bath House. Leave St. Malo, 10-29-18 to 11-14-18; Paris, 1-29-19 to 2-2-19.
- PROSSER, Amy A.—Nurse Hosp D. DS BH#15, 12-29-17 to 1-24-18; 42nd Div, 5-4-18 to 6-27-18. Leave Nice, 9-26-18 to 10-8-18. Trans fr BH#31 to BH#60. Dropped fr roll BH#32, 1-8-19.
- PRUST, Beulah G.—Nurse Hosp D. DS Baccarat, 6-26-18 to 2-13-19. Dropped fr roll BH#32, 2-13-19.

- PUGH, Joseph M.—Cook, 10-1-18. Kitchen Hosp D. DS BH#15, 12-30-17 to 2-15-18; EH#2, 6-24-18 to 6-30-18. Leave St. Malo, 11-16-18 to 11-29-18.
- QUIMBY, Smith—Lieut 1st, 6-20-17; Capt, 2-17-19. Surgical Staff Hosp A. DS 42nd Div, 4-27-18 to 7-3-18. Leave Chambery, 7-17-18 to 7-30-18.
- QUINN, Edward T.—Pvt 1Cl, 2-1-18; Corp, 10-24-18; Sgt, 11-18-18. MP & Office Hosp A. Leave Haute Savoie Area, 7-19-18 to 7-31-18; Le Boule, 3-18-19 to 3-22-19.
- REED, Oliver—Kitchen Hosp A. Evac US San Tr #52 to Hosp Cent Bordeaux, 11-4-18. Dropped fr roll BH#32, 11-29-18.
- REEL, Leonard R.—Sgt, 1917; Sgt 1Cl, 1-1-18; Lieut 1st, 7-1-18. Detachment Commander. Leave Nice, 11-18-18 to 12-2-18. Trans BS#1, 2-20-19.
- REEVES, Edward D.—Corp, 3-13-18; Sgt, 10-24-18; Sgt 1Cl, 11-18-18. NCO in Charge Gen Detail. Leave Nice, 11-8-18 to 11-22-18.
- REIMERS, Robert S.—Lieut 1st, 1917. Ophthalmologist. DS BH#8, 5-23-18 to 6-25-18. Trans EH #7, 7-3-18.
- REITENOUR, Clarence D.—Pvt 1Cl, 2-1-18. Orderly Hosp A. DS Surg Team #19, 4-9-18 to 10-12-18. Trans Mobile Hosp #11, 10-12-18.
- RICH, Roy F.—Corp, 1917; Sgt 1Cl, 1-1-18. NCO in Charge Hosp A. DS MSD #3, 10-17-18 to 12-18-18; St. Nazaire, 2-17-19 to 2-24-19. Leave Nice, 9-10-18 to 9-24-18; Lyon, 1-22-19 to 1-26-19.
- RICKETTS, Joseph W.—Lieut 1st, 5-1917; Capt, 3-5-19. Surgical Staff. Officer in Charge Hosp B. DS 42nd Div, 4-27-18 to 7-7-18. Leave Nice, 7-8-18 to 7-21-18; Paris, 12-5-18 to 12-10-18.
- RIDDELL, Harry L.—Pvt 1Cl, 10-24-18. Orderly Hosp A. DS Hdqrs SOS Tours, 2-9-19 to 3-18-19. Leave St. Malo, 11-16-18 to 12-1-18.
- RIGGS, Glenn A.—Pvt 1Cl, 2-1-18; Corp, 5-20-18; Sgt, 8-1-18. Garage Vittel.
- RITTER, Paul F.—Pvt 1Cl, 4-5-18. Orderly Hosp A. DS Vichy, 9-26-18 to 9-29-18. Leave Haute Savoie Area, 11-21-18 to 12-3-18.
- ROBERSON, Tulie—Nurse. Surgery Hosp A. DS Baccarat, 6-26-18 to 8-16-18. Leave Nice, 11-14-18 to 11-29-18.
- ROBINSON, Dar A.—Sgt 1Cl, 8-1-18. Pharmacist. Hosp A. Leave Nice, 9-10-18 to 9-24-18; Paris, 1-28-19 to 2-2-19.
- ROCK, Nellie—Nurse. Surgery Hosp A. DS BH#15, 12-29-17 to 2-4-18; 42nd Div, 5-4-18 to 6-27-18; Surg Team #19, 7-28-18 to 10-11-18. Trans Mobile Hosp #11, 10-11-18.

- ROGERS, Warren K.—Corp, 9-24-18; Sgt, 10-24-18. NCO in Charge Gen Detail. Leave Nice, 11-8-18 to 11-22-18.
- ROHR, Anna M.—Nurse Hosp E. DS Baccarat, 6-26-18 to 12-27-18. Trans 3rd Army, 1-13-19.
- ROUTH, Paul N.—Pvt 1Cl, 5-20-18. Garage Vittel.
- RUSSELL, Frank—Pvt 1Cl, 9-20-18. Garage Vittel.
- RYAN, Eleanor C.—Head Nurse Hosp C. DS BH#15, 12-29-17 to 1-24-18; Surg Team #20, 4-20-18 to 8-20-18. Trans Camp Hosp #12, 8-20-18.
- SANAGAN, Albert C.—Pvt 1Cl, 2-1-18; Corp, 5-20-18; Sgt, 10-10-18. NCO in Charge Officers Quarters. Leave Nice, 8-26-18 to 9-7-18; Paris, 1-7-19 to 1-11-19; Paris, 2-12-19 to 2-15-19.
- SATTERS, Albert—Cook. Kitchen Hosp A-D.
- SCALES, Mary A.—Asst Chief Nurse. Head Nurse Hosp A. DS ARC Bureau of Surg Dressings Paris, 1-10-18 to 2-18-18. Leave Le Croisic, 8-26-18 to 9-7-18; Nice, 12-28-18 to 1-9-19.
- SCHERER, Jack W.—Lieut 1st, 1917. Dental Dept. Hosp A. Leave Biarritz, 7-20-18 to 7-27-18. Trans 20th Eng, 7-29-18.
- SCHILLERSTROM, Curtis G.—Pvt 1Cl, 10-24-18. Orderly Hosp A. Leave St. Malo, 10-12-18 to 10-27-18.
- SCHOLER, Ida A.—Nurse Hosp D. DS BH#15, 12-29-17 to 2-4-18; Paris, 12-22-18 to 12-24-18. Leave Nice, 11-30-18 to 12-13-18. Trans 3rd Army, 1-13-19.
- SCOVELL, Calvin L.—Pvt 1Cl, 9-20-18. Kitchen Hosp B. Leave Grenoble, 12-9-18 to 12-23-18.
- SEARLE, Ferrell G.—Office Hosp A. Trans QMC, 7-16-18.
- SELCH, Charles G.—Kitchen Hosp A. Leave St. Malo, 11-3-18 to 11-19-18.
- SELF, Harold C.—Pvt 1Cl, 9-20-18. Orderly Hosp A & Gen Detail. Leave Grenoble, 12-9-18 to 12-23-18.
- SELLMEYER, Arnold J.—Pvt 1Cl, 2-1-18. Garage Vittel.
- SERTELL, Peter J.—Pvt 1Cl, 8-1-18. Carp QM Detail. Leave Grenoble, 12-2-18 to 12-16-18.
- SHEARER, Beryl C.—Pvt 1Cl, 5-20-18; Sgt, 11-18-18. Cent Lab. Leave Nice, 12-10-18 to 12-23-18.
- SHELLER, Vernon G.—Sgt, 9-15-17; Sgt 1Cl, 1-1-18; 1st Sgt. Leave Nice, 10-18-18 to 10-31-18; Le Boule, 3-19-19 to 3-23-19.
- SHIMER, Myrtle—Nurse Hosp A. DS Savenay, 3-31-18 to 4-5-18. Leave Nice, 12-9-18 to 12-21-18.
- SMITH, Glenn—Gen Detail. Leave Grenoble, 12-13-18 to 12-27-18.
- SMITH, Golda F.—Nurse Hosp E. DS BH#15, 12-29-17 to 2-4-18; 42nd Div, 5-4-18 to 6-27-18. Leave Nice, 11-14-18 to 11-29-18.
- SMITH, Montelle E.—Pvt 1Cl, 10-24-18. Gen Detail. Leave Grenoble, 12-26-18 to 1-8-19.

- SNYDER, Claude E.—Pvt 1Cl, 2-1-18. Dental Dept Hosp A. Trans 20th Eng, 7-29-18.
- SPAINHOUR, Paul G.—Pvt 1Cl, 5-20-18. Orderly Hosp A. DS ARC Hosp #5, 5-28-18 to 12-8-18.
- SPARKS, James V.—Lieut 1st, 1917. Dentist Hosp A. Leave Biarritz, 7-7-18 to 7-19-18. Trans Attend Surg Nice, 1-2-19.
- STEFFEN, Gertrude—Civ Emp. Secy Chief Med Sect Hosp D. Leave Paris, 8-19-18 to 8-25-18; Nice, 12-12-18 to 12-23-18.
- STEPHAN, Wilbur M.—Kitchen Hosp D. Leave Grenoble, 11-25-18 to 12-7-18.
- STEPHENS, William A.—Garage. Leave St. Malo, 10-29-18 to 11-14-18.
- STOUGH, Charles S.—Pvt 1Cl, 9-20-18. X-Ray Dept Hosp A. Leave Grenoble, 12-9-18 to 12-23-18.
- STUART, Louis S.—Pvt 1Cl, 2-1-18. Cent Lab. Leave Haute Savoie Area, 7-7-18 to 7-19-18.
- STUVEL, Bernard—Pvt 1Cl, 2-1-18. Plumb QM Detail. Leave Haute Savoie Area, 9-15-18 to 9-28-18.
- SUMMERS, Leslie E.—Pvt 1Cl, 8-1-18. X-Ray Dept Hosp A. Leave Grenoble, 12-13-18 to 12-27-18.
- SUTTON, Martin L.—Pvt 1Cl, 5-20-18; Corp, 8-1-18. QM Warehouse. Leave Nice, 10-18-18 to 10-31-18.
- SWAIM, George O.—Corp, 9-15-17; Sgt 1Cl, 1-1-18. NCO in Charge Garage & Hosp B. Leave Paris, 1-28-19 to 2-2-19.
- SWEET, Ralph L.—Lieut 1st, 9-1-17. Surgical Staff Hosp A. Leave Nice, 7-8-18 to 7-21-18. Trans Mobile Hosp #11, 10-13-18.
- SWIFT, Agnes L.—Nurse. Surgery Hosp A. DS BH#90, 1-17-19 to 2-5-19. Leave Nice, 12-10-18 to 12-23-18.
- THOMPSON, Elsie—Nurse Hosp B. Leave Nice, 12-11-18 to 12-24-18.
- THOMPSON, Helen A.—Nurse Hosp A-B. Leave Nice, 12-10-18 to 12-23-18.
- THRELKELD, Addie—Nurse Hosp A-C. DS Baccarat, 6-24-18 to 6-30-18. Leave Nice, 11-25-18 to 12-8-18.
- TOTTEN, Ruth G.—Nurse Hosp B. DS BH#15, 12-29-17 to 2-4-18; BH#90, 1-17-19 to 2-18-19. Leave Nice, 11-10-18 to 11-23-18.
- VAN DYKE, Eva B.—Nurse Hosp A-D.
- VAN EVERA, Grace—Nurse Hosp A-C. DS BH#90, 1-17-19 to 2-5-19. Leave Nice, 12-13-18 to 12-26-18.
- WAGNER, Hermina E.—Nurse Hosp A. Leave Haute Savoie Area, 9-9-18 to 9-27-18. Trans 3rd Army, 1-13-19.
- WAGNER, William H.—Kitchen Hosp A. Leave Haute Savoie Area, 7-19-18 to 7-31-18.
- WALGREN, Roy L.—Pvt 1Cl, 10-24-18. Gen Detail. Leave Grenoble, 12-9-18 to 12-23-18.

- WALKER, Ben S.—Capt, 1917. DS ARC Hosp #5, Paris, 5-30-18 to 12-12-18.
- WALKER, Frank C.—Lieut 1st, 9-6-17; Capt, 3-5-19. Surgical Staff Hosp A. DS Surg Team #20, 4-20-18 to 7-14-18; Surg Team #20, 7-17-18 to 11-24-18.
- WATTS, Stanley S.—Pvt 1Cl, 9-20-18. Orderly Hosp E. Leave St. Malo, 10-12-18 to 10-26-18; Paris, 3-10-19 to 3-12-19.
- WEER, Paul W.—Pvt 1Cl, 8-1-18. Registrar Office Hdqrs. Leave Haute Savoie Area, 10-1-18 to 10-16-18.
- WEHMAN, Edward J.—Lieut 1st, 1917; Capt, 3-5-19. Medical Staff & Cent Lab. DS Mobile Hosp #39, 7-1-18 to 7-31-18; Paris, 3-10-19 to 3-12-19.
- WEITENDORF, Alys—Nurse Hosp C-E. DS BH#15, 12-29-17 to 2-4-18; Baccarat, 6-24-18 to 6-30-18. Leave Biarritz, 8-29-18 to 9-10-18. Trans BH#90, 1-17-19.
- WELLS, Russell D.—Pvt 1Cl, 10-24-18. QM Office Hdqrs Vittel. Leave Haute Savoie Area, 7-7-18 to 7-19-18; Dijon, 12-14-18 to 12-18-18; Paris, 1-31-19 to 2-6-19.
- WESLEY, Alton J.—Pvt 1Cl, 10-24-18. Orderly Hosp A. Leave St. Malo, 10-29-18 to 11-14-18.
- WESTFALL, Don—Sgt, 2-22-18. Lab Hosp E. Leave Haute Savoie Area, 10-1-18 to 10-14-18.
- WHITAKER, Bessie—Nurse Hosp A-C. Leave Nice, 12-10-18 to 12-23-18.
- WHITE, Dudley—Cook, 9-15-17; Sgt, 2-1-18. NCO in Charge Kitchen Hosp A.
- WHITE, George L.—Corp, 1917; Sgt, 8-1-18. MP & QM Detail. Leave Nice, 12-10-18 to 12-23-18.
- WHITLOCK, Olive—Nurse Hosp A-E. DS Surg Team #20, 7-24-18 to 9-25-18; BH#90, 1-17-19 to 2-5-19. Leave Nice, 12-13-18 to 12-26-18.
- WILLIAMS, Clifford J.—Gen Detail. DS EH#2, 6-24-18 to 6-30-18.
- WINTER, Daniel L.—Cook, 10-1-18. Kitchen Hosp B. Leave Grenoble, 11-25-18 to 12-7-18.
- WISE, Earl M.—Pvt 1Cl, 9-20-18. Engineer & Fireman Elec Light Plant. Leave St. Malo, 11-16-18 to 11-29-18.
- WOELLHAF, Guy A.—Pvt 1Cl, 10-24-18. Orderly Hosp E. Leave Grenoble, 12-9-18 to 12-23-18.
- WRIGHT, Merle M.—Nurse Hosp A-E. DS BH#90, 1-17-19 to 2-5-19. Leave Nice, 11-13-18 to 11-28-18.
- WRIGHT, Ruth—Nurse Hosp D. DS BH#15, 12-29-17 to 1-24-18; Baccarat, 6-26-18 to 2-13-19. Dropped fr roll BH#32, 2-13-19.



- WRIGHT, Worth E.—Pvt 1Cl, 8-1-18. Gen Detail. Leave Haute Savoie Area, 7-7-18 to 7-19-18; Nice, 1-24-19 to 2-7-19.
- YARLING, Earl W.—Pvt 1Cl, 9-20-18. Gen Detail. Leave Dinard, 10-29-18 to 11-14-18.
- YOUNG, Lowell R.—Orderly Hosp A. DS EH#2, 6-24-18 to 6-30-18; Surg Team #19, 7-29-18 to 10-12-18. Trans Mobile Hosp #11, 10-12-18.
- YOUNT, Ray R.—Orderly Hosp D. Leave Grenoble, 12-9-18 to 12-23-18.



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